



TRUSTED CONTACT FORM

A trusted contact is someone who can help us help you, if needed. Add one today!

What is a trusted contact? - A trusted contact is a person who we can contact in the event that we cannot reach you.

When would we reach out to your trusted contact?

- To address possible fraud involving your account.
- To confirm your mental or physical health status.
- If we have trouble reaching you; potential health crisis, there is a natural disaster, you are traveling internationally.

What can your trusted contact do?

Your trusted contact may be asked to validate information about you or your accounts. It is important to note that a trusted contact **cannot**:

- Make trades in your account.
- Make decisions about your account.
- Receive access to your account.

What are the requirements of a trusted contact?

A trusted contact must be 18 years of age or older. They may be a family member, significant other, attorney, close friend, or another third-party. You may establish more than one trusted contact on each account. AAF Wealth Management, LLC recommends the designation of someone other than a spouse (or in addition to your spouse) or a person with direct or indirect beneficial interest in your accounts.

Authorization: I, _____, authorize AAF Wealth Management, LLC to contact and disclose any information and/or documents related to my accounts under management with AAF Wealth Management, LLC, in addition to any additional information held by my current custodian to the person(s) listed below.

As such, I designate the following individual(s) as my trusted contact person(s), whose contact information is listed below, and to receive on my behalf any information related to my accounts managed by AAF Wealth Management, LLC. This authorization specifically excludes my trusted contact person(s) from making any decisions on my behalf for my account(s) managed by AAF Wealth Management, LLC. This designation shall remain in effect until AAF Wealth Management, LLC receives written notification from me to terminate this authorization.

Trusted Contact Person: _____; Trusted Contact Person: _____

Relationship: _____; Relationship: _____

Address (Line 1): _____; Address (Line 1): _____

Address (Line 2): _____; Address (Line 2): _____

Mobile Phone Number: _____; Mobile Phone Number: _____

Email: _____; Email: _____

Client's Name (Print)

Client's Signature

Date

This form supersedes any previous trusted contact designations that you have submitted.