Financial Representative Authorization

INSTRUCTIONS

Use this form to designate, change, or remove a Financial Representative (FR) on your account. Columbia Private Trust does not require you to designate an FR. Account Owner and FR signatures are required on page 2.

1. ACCOUNT OWNER INFORMATION

ACCOUNT OWNER NAME (FIRST, MI, LAST)*	COLUMBIA PRIVATE TRUST ACCOUNT NO.**

SSN**	DATE OF BIRTH*	PRIMARY PHONE*

MAILING ADDRESS*

CITY*	STATE/PROVINCE*	COUNTY*	POSTAL CODE*

* Required ** Complete either SSN or Account No.

☐ Apply the following elections to **all my accounts** held by Columbia Private Trust.

2. ELECTIONS

Please select the type of designation you would like made to your account(s):

☐ Add Financial Representative

☐ Remove Financial Representative Name of Financial Representative to be removed: ____________

☐ Update Financial Representative Name of Financial Representative to be updated: ____________

3. FINANCIAL REPRESENTATIVE INFORMATION

Complete this section for the Financial Representative (FR) that will be designated on your account. Your Financial Representative should be able to provide you with this required information.

* Required ** Either FR's CRD Number or the FR Firm CRD Number Required

NAME* (FIRST, MI, LAST)	OFFICE NAME*	FR BROKER-DEALER*

SSN*	DATE OF BIRTH*

FR INDIVIDUAL CRD NO.**	FIRM CRD NO.**

FR NUMBER	FR BRANCH NUMBER

LEGAL ADDRESS*

CITY*	STATE/PROVINCE*	POSTAL CODE*

PRIMARY PHONE NO.*	MOBILE PHONE NO.	FAX NO.

EMAIL ADDRESS*

4. AUTHORIZATION

Please refer to the disclosure agreement below that pertains to your Affiliated Party designation.

PLEASE SIGN AND DATE BELOW.

ACCOUNT OWNER SIGNATURE	DATE (REQUIRED)

5. FINANCIAL REPRESENTATIVE

I, ______________________ (representative's name), hereby consent to my designation as Financial Representative (FR) by the Account Owner of the above-named IRA or custodial account. I understand and acknowledge that, as FR, I will be acting as the authorized agent of the Account Owner and not as the agent of Columbia Private Trust. Additionally, I affirmatively represent to both the Account Owner and Columbia Private Trust that I will not make any statements or other communications to or with the Account Owner or any other party suggesting that I am acting as the agent of Columbia Private Trust for any purpose relating to this retirement account or to any investment.

I acknowledge that I am not, nor are any of my employees, staff, broker-dealer firm (if applicable), and any companies to which I or the aforementioned are associated, a sponsor of or otherwise affiliated with any investment in any account for which I am appointed as FR. I agree that it is my responsibility to ensure compliance with this provision and to remove myself as an FR in the event of non-compliance.

I acknowledge that if I am associated with a member of FINRA or of certain financial exchanges (each an "Employer Member"), I may be required by applicable rules to notify such Employer Member of my affiliation to this Account. I acknowledge my responsibility to ensure that the Employer Member is provided with such information as is necessary to ensure compliance with applicable rules with respect to my activities in connection with this Account. I further acknowledge that it is a condition of my appointment by the Account Owner as FR to this Account that I comply with all laws, rules, and regulations that apply to me and to this Account, and that if I do not, I understand that I may be removed as FR.

Client Maintenance Fax Number: 303.614.7038.

PLEASE SIGN AND DATE BELOW.

FINANCIAL REPRESENTATIVE SIGNATURE	DATE (REQUIRED)

6. DISCLOSURES: FINANCIAL REPRESENTATIVE

BY SIGNING ABOVE, ACCOUNT OWNER ACKNOWLEDGES THE FOLLOWING:

I agree that I, and not Columbia Private Trust and its related entities, am solely responsible for the actions of my FR in connection with my Account and any investments in my Account. I acknowledge and agree that I am solely responsible for selecting my FR, and that the FR is my agent and not the employee or agent of Columbia Private Trust and is not affiliated with Columbia Private Trust and its related entities in any way.

I make the above FR designation subject to all applicable provisions of the Account Establishment Documents, including but not limited to the Terms and Conditions of Appointment of FR contained in the Custodial Agreement Terms and Conditions Addendum. I authorize this individual to execute transactions for my account, including but not limited to purchases, sales, and exchanges of investments for the Account. I also authorize my FR and, if applicable, my FR's broker-dealer to receive electronic statements and any other account information from Columbia Private Trust via written, telephone, or electronic communications.

I affirm that this FR and his/her employees, staff, broker-dealer firm, and any companies to which my FR or the aforementioned are associated are not a sponsor of or otherwise affiliated with any investment in my account. I agree that it is my responsibility to review any investments for my Account to ensure compliance with this provision and to remove my FR from my Account in the event of non-compliance.

I acknowledge that it is my responsibility to monitor the actions of my FR to ensure compliance with all laws, rules, and regulations and to remove my FR from my Account if he/she does not comply with the laws, rules, and regulations that apply to my Account.

I acknowledge and agree that Columbia Private Trust is under no duty to investigate or inquire about my FR or any directions or instructions given by my FR. I further agree that Columbia Private Trust and its related entities will have no liability for any losses that may occur due to changes in the market value of an investment or Columbia Private Trust's actions or inactions based on reliance on instructions from me or my FR.

I understand that I may revise this information at any time by giving written notice to Columbia Private Trust. I am aware that any change to my authorized FR will not cancel any instructions given by my FR prior to Columbia Private Trust receiving written notice of the change.

Upload forms to:
ColumbiaPrivateTrust.com/Upload

Fax to: 303.614.7038

Send mail to:
Columbia Private Trust
Processing Center
P.O. Box 981012
Boston, MA 02298

Questions?
Call 800.962.4238