

## Invesco Trusted Contact Form

Use this form to add or remove a trusted contact to your new or existing Invesco account.

Important information regarding trusted contact: Designating a trusted contact is not required and does not authorize the named individual to transact on or make changes to the account owner's account, but it does authorize Invesco Investment Services, Inc. (IIS) to communicate with the trusted contact regarding the account. There can only be one trusted contact per account.

\*Required

Account Registration (Please print name(s) as it appears on account.)  Email Address  2   Contact Preference In some cases, Invesco will attempt to contact you for more information or to resolve any discrepancies that may be present with your request. The preferred method you provide below will be used for this request only and will not be added to your account for future contact.  Please provide your preferred method of contact (Select one.)  Please contact my financial professional on record.  Please contact me at	PLEASE USE BLUE OR BLACK INK	PLEASE PRINT CLEARLY IN BLOCK CAPITAL LETTERS
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Email Address    2   Contact Preference	SSN* or TIN*	Invesco Account Number or Plan ID
Contact Preference	Account Registration (Please print name(s) as it appears on account	ount.)
Contact Preference		
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By providing the information in this section, I authorize IIS to contact the person listed below and to disclose information about me in the following circumstances: to prevent the presumption of abandonment, to address possible financial exploitation, to confirm the specifics of my current contact information, health status, or the identity of any legal guardian, executor, trustee, or holder of a power of attorney or as otherwise permitted by federal or state law. Any information provided on this form will replace the information currently on file.  Note: Your trusted contact should not be a joint account owner or the financial professional on record.  Please select one.  Add the following individual as trusted contact to my account  Remove the following individual as trusted contact from my account  Full Name of Trustee Contact*  Date of Birth* (mm/dd/yyyy)  Mailing Address* (Including apartment or P.O. Box number.)	present with your request. The preferred method you provide bel to your account for future contact.  Please provide your preferred method of contact (Select one.)  Please contact my financial professional on record.	
about me in the following circumstances: to prevent the presumption of abandonment, to address possible financial exploitation, to confirm the specifics of my current contact information, health status, or the identity of any legal guardian, executor, trustee, or holder of a power of attorney or as otherwise permitted by federal or state law. Any information provided on this form will replace the information currently on file.  Note: Your trusted contact should not be a joint account owner or the financial professional on record.  Please select one.  Add the following individual as trusted contact to my account  Remove the following individual as trusted contact from my account  Full Name of Trustee Contact*  Date of Birth* (mm/dd/yyyy)  Mailing Address* (Including apartment or P.O. Box number.)	3   Trusted Contact Information	
Please select one.  Add the following individual as trusted contact to my account  Remove the following individual as trusted contact from my account  Full Name of Trustee Contact*  Social Security Number*  Date of Birth* (mm/dd/yyyy)  Mailing Address* (Including apartment or P.O. Box number.)	about me in the following circumstances: to prevent the presump exploitation, to confirm the specifics of my current contact inform executor, trustee, or holder of a power of attorney or as otherwise	otion of abandonment, to address possible financial ation, health status, or the identity of any legal guardian, e permitted by federal or state law. Any information
Add the following individual as trusted contact to my account  Remove the following individual as trusted contact from my account  Full Name of Trustee Contact*  Social Security Number*  Date of Birth* (mm/dd/yyyy)  Mailing Address* (Including apartment or P.O. Box number.)	Note: Your trusted contact should not be a joint account owner of	r the financial professional on record.
Social Security Number*  Date of Birth* (mm/dd/yyyy)	Please select one.  ☐ Add the following individual as trusted contact to my account ☐ Remove the following individual as trusted contact from my ac	count
Mailing Address* (Including apartment or P.O. Box number.)	Full Name of Trustee Contact*	
Mailing Address* (Including apartment or P.O. Box number.)		
	Social Security Number*	Date of Birth* (mm/dd/yyyy)
City* State* ZIP*	Mailing Address* (Including apartment or P.O. Box number.)	
City* State* ZIP*		
City* State* ZIP*		
City State" ZIP"	Cih.*	Ctoto* 7ID*
	City	State ZIP*

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PLEASE USE BLUE OR BLACK INK	PLEASE PRINT CLEARLY IN BLOCK CAPITAL LETTERS
Foreign Routing or Postal Code	Country of Residence if outside the U.S.
Primary Phone Number	Email Address
Relationship to Account Owner	
4   Authorization and Signature(s)	
By signing this form, I authorize and direct IIS instructions set forth above.	to maintain the account(s) referenced above in accordance with the
Signature*	Date (mm/dd/yyyy)
x	
Title	
Signature	Date (mm/dd/yyyy)
X	
Title	
E   Mailing Instructions	
<b>5   Mailing Instructions</b> Please send completed and signed form to:	
	ernight Mail)
	sco Investment Services, Inc. DST Systems, Inc.
Kansas City, MO 64121-9078 430 V	W. 7th Street
	eas City, MO 64105-1407 Silent Services representative at 800 959 4246, weekdays, 7 a.m. to 6 p.m.
Central Time.	
Visit	our website at invesco.com/us to:
<ul> <li>Check your account balance</li> <li>Confirm transaction history</li> <li>View account statements and tax forms</li> <li>Sign up for eDelivery of statements, daily tr statements, tax forms, prospectuses, and r</li> </ul>	
Call the 24-Hou	ur Automated Investor Line 800 246 5463 to:

- Obtain fund prices
- Confirm your last three transactions
- Order a recent account statement(s)

- Check your account balance
- Process transactions

To use the system, please have your account numbers and Social Security number available.