



Add a Trusted Contact Person

Schwab.com

1-800-435-4000
(inside the U.S.)

+1-415-667-8400
(outside the U.S.)

1-888-686-6916
(multilingual services)

We're here to help.

- Use this form to add up to two Trusted Contacts for your Schwab accounts. You may also update your Trusted Contact information by visiting Schwab.com or calling 1-800-435-4000.
- Adding a Trusted Contact provides Schwab with a resource to contact on your behalf, if necessary. A Trusted Contact is a person whom you are permitting Schwab to contact and disclose information to about your account to address possible financial exploitation; to confirm your 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 applicable rules.

Trusted Contact Designation

- **Naming a Trusted Contact is optional.**
- **The Trusted Contact(s) must be at least 18 years old.**
- **The Trusted Contact(s) will not be able to view your account information, execute transactions, or inquire about account activity.**
- **Schwab suggests that your Trusted Contact(s) not be someone who is already authorized to transact business on your account(s) or already able to receive information about your Schwab account(s)—e.g., financial consultant, investment advisor, or by virtue of Power of Attorney or View Only authority.**
- **You do not need to designate a separate Trusted Contact for each Schwab account. A single designation covers all Schwab accounts over which you are the account holder or joint account holder, trustee, or agent.**
- **For accounts with multiple account holders, trustees, or agents, please fill out a separate Trusted Contact form for each account holder, trustee, or agent.**
- **Only you as the account holder have the ability to add, update, or remove a Trusted Contact(s) for your account(s).**

1

Account Holder Information

The Trusted Contact designation(s) only applies to the Account Holder/Trustee/Agent named below. Schwab will use the information you provide to verify your identity, provide services, communicate with you, and provide you with information about our products and services. Learn more at international.schwab.com/privacy.

If you do not have a Social Security Number, please provide one of your Schwab Account Numbers.

Social Security Number _____ or Schwab Account Number _____

Name Title, First _____ Middle Name _____ Last, Suffix _____

2

Trusted Contact Person(s)

Trusted Contact information provided on this form will replace all Trusted Contact information currently on file.

Person 1

Name Title, First _____ Middle Name _____ Last, Suffix _____

Relationship

Please select only one.

Spouse Partner Child Parent Sibling Friend Other _____

Please provide at least one method of contact for each Trusted Contact listed.

Home/Legal Street Address No P.O. Boxes _____ City _____

Country _____ State or Province _____ Postal or Zip Code _____

Home Phone Number _____ Mobile Phone Number _____ Email Address _____

Person 2

Name Title, First _____ Middle Name _____ Last, Suffix _____



Relationship

Please select only one.

Spouse Partner Child Parent Sibling Friend Other _____

Please provide at least one method of contact for each Trusted Contact listed.

Home/Legal Street Address *No P.O. Boxes* _____ City _____

Country _____ State or Province _____ Postal or Zip Code _____

Home Phone Number _____ Mobile Phone Number _____ Email Address _____

3 Account Holder/Trustee/Agent Authorization Agreement and Signature

I understand that there is no requirement that Schwab reach out to my Trusted Contact Person and that I may withdraw this Authorization at any time by notifying Schwab via phone or in writing at the address shown on my account statement. By signing below, I and my heirs agree to indemnify and hold Schwab, its predecessors, successors, officers, directors, employees, agents, representatives, parents, affiliates, assigns, and attorneys harmless from and against any and all claims, judgments, taxes, fines, penalties, damages, liabilities, costs, and expenses (including but not limited to attorneys' fees and expert witness fees) incurred by Schwab as a result of any claim, judgment, or proceeding arising out of or relating to Schwab contacting, or failing to contact, my Trusted Contact Person(s) identified in this form.

By my signature below, I authorize Schwab and its affiliates to share my nonpublic personal information held at Schwab with the named Trusted Contact Person(s) identified above. Nonpublic personal information includes, but is not limited to, financial account information and balances, recommendation for purchase of a security or insurance product, and, as defined in Title V of the federal Financial Services Modernization Act of 1999 as amended, or as defined by any other federal or state law, personally identifiable financial information (i) provided by a consumer to a financial institution; (ii) resulting from any transaction with the consumer or any service performed for the consumer; or (iii) otherwise obtained by the financial institution.

I understand that Schwab or my advisor may contact the Trusted Contact Person(s) and disclose information about my account to address possible financial exploitation; to confirm the specifics of my current contact information or health status or the identity of any legal guardian, executor, trustee, or holder of a power of attorney; or as otherwise permitted by FINRA rules.

I understand that if an investment advisor is linked to my account(s), then my Trusted Contact Person(s) information will be made available to the investment advisor, and Schwab may notify the investment advisor of Schwab's interactions with the Trusted Contact Person(s). I agree that Schwab will not be responsible for, and cannot monitor, the investment advisor's use of the Trusted Contact Person(s) information.

SIGN HERE 

Please sign and date using blue or black ink.

Account Holder Signature _____ Today's Date (mm/dd/yyyy) _____

Print Name Title, First _____ Middle Name _____ Last, Suffix _____

4 Return Instructions

- **Upload** online with secure messaging (if you are an existing client and have online access to your account).
 1. Go to Schwab.com and log in to your account.
 2. Click the Message Center link (under Service), and then click the Compose New Message link.
 3. Upload your form as an attachment by clicking the Add File button.
 4. When your message is complete, click Send.
- **Fax** to 1-888-526-7252 (within the U.S.) or 1-415-956-3212 (outside the U.S.).
- **Bring** to your nearest Schwab branch (visit Schwab.com/branch for locations).
- **Mail** to any of the following addresses:

Regular Mail (West) Charles Schwab & Co., Inc. P.O. Box 982600 El Paso, TX 79998-2600	Regular Mail (East) Charles Schwab & Co., Inc. P.O. Box 628291 Orlando, FL 32862-8291	Overnight Mail (West) Charles Schwab & Co., Inc. 1945 Northwestern Dr. El Paso, TX 79912	Overnight Mail (East) Charles Schwab & Co., Inc. 1958 Summit Park Dr., Ste. 200 Orlando, FL 32810
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