



Authorization For Payment/Management Advisory Fees

IMPORTANT INFORMATION

Please use this form to authorize Pacific Premier Trust to deduct investment management/advisory fees from your account as instructed by your Registered Investment Advisor (RIA)/Money Manager.

1. ACCOUNT OWNER INFORMATION

ACCOUNT OWNER NAME (FIRST, MI, LAST)*	PACIFIC PREMIER TRUST ACCOUNT NO.*
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- I authorize Pacific Premier Trust to pay from my Account all fee-related invoices received from the below-named RIA/Money Manager. I understand and agree that Pacific Premier Trust has no responsibility to verify the validity or calculation of the fees.
- I hereby indemnify and hold harmless Pacific Premier Trust, its directors, officers and employees from any and all liabilities and costs, including, but not limited to, attorney's fees which may be incurred by relying upon the representations of the below-named RIA/Money Manager or on this fee payment authorization.
- This authorization and indemnity is a continuing one and shall remain in full force and effect and shall be binding upon the undersigned's heir, executors, successors, beneficiaries, or assignees until revoked by the undersigned through a written notice received by Pacific Premier Trust. Such revocation will become effective as soon as Pacific Premier Trust has had a reasonable amount of time to act upon it. The revocation shall not affect any liability in any way resulting from transactions initiated prior to Pacific Premier Trust active on such revocation.

 ACCOUNT OWNER SIGNATURE*	DATE*
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2. RIA/MONEY MANAGER INFORMATION

ACCOUNT OWNER NAME (FIRST, MI, LAST)*	ADVISORY FIRM NAME*
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STREET ADDRESS			
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CITY*	STATE/PROVINCE*	COUNTY*	POSTAL CODE*
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TIN*	<input type="checkbox"/> Check one: <input type="checkbox"/> Incorporated <input type="checkbox"/> Unincorporated <input type="checkbox"/> Check Fee Type: <input type="checkbox"/> Management <input type="checkbox"/> Advisory
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- I will provide Pacific Premier Trust true and accurate invoices of the advisory fees owed to me by the above-referenced Account, which you are to deduct from the Account and pay to the above listed firm, pursuant to any invoices submitted by me. I understand that Pacific Premier Trust will not deduct and pay invoices of an amount less than \$50.
- I will indemnify and hold Pacific Premier Trust, its directors, officers, and employees harmless from all liabilities and costs, including, but not limited to, attorney's fees which may be incurred by relying on my representations or on the above fee payment authorization.
- This indemnification shall extend to the benefit of your successors and assignees.
- Under penalties of perjury, I certify that the information provided above, including the taxpayer identification number is correct and accurate.

 RIA/MONEY MANAGER SIGNATURE*	DATE*
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NON-DEPOSIT INVESTMENT PRODUCTS ARE NOT INSURED BY THE FDIC; ARE NOT DEPOSITS OR OTHER OBLIGATIONS OF, OR GUARANTEED BY, THE BANK OR ANY OF ITS DIVISIONS; AND ARE SUBJECT TO INVESTMENT RISKS, INCLUDING POSSIBLE LOSS OF THE PRINCIPAL AMOUNT INVESTED.

Upload forms to:
PacificPremierTrust.com/upload
 Fax to: 303.614.7098

Send mail to:
 Pacific Premier Trust
 Processing Center
 PO BOX 981012
 Boston, MA 02298

For express deliveries:
 FIS-Remittance Processing
 Loading Dock #2
 Attn: Pacific Premier Trust
 10 Dan Road
 Canton, MA 02021

Questions?
 Call: 800.962.4238

