

## RBC Direct Investing Inc. Trusted Contact Person (TCP) Authorization Form

Client Name:			
Client Account <sup>[1]</sup> Number(s):			

You may provide us<sup>[2]</sup> with the name and contact information of a person(s) you trust to assist us in protecting you from financial exploitation or if there are concerns about your mental capacity as it relates to your account(s) with us. By completing this form, you consent and agree to the following:

Who should you designate as your TCP(s)? Preferably choose someone you trust who is:

- Mature (regardless of age) and able to conduct potentially difficult conversations about your personal situation.
- Not involved in making investment decisions or transactions with respect to your account(s).
- In addition to and separate from a Power of Attorney or Trading Authority on your account(s).

You agree that you will notify your TCP(s) that you have named them as such, obtain their consent to share their personal information with us and submit a new authorization form if you do not obtain their consent.

**Can you change your TCP(s)?** You may change or remove your TCP(s) by submitting a new authorization form, which will replace or revoke any prior designation.

When may we contact your TCP(s)? We may contact your TCP(s) at our discretion in relation to your current or future account(s) with us regarding the following only:

- Our concerns about possible financial exploitation affecting you.
- Our concerns about your mental capacity as it relates to decisions involving financial matters.
- Accuracy of your contact information.
- Name and contact information of your legal representative (if any).

You will release us from all claims, causes of action, damages, losses, expenses, costs, and liabilities, direct or indirect, of any kind that may arise out of, relate to, or are in connection with us contacting or failing to contact your TCP(s).

<sup>1.</sup> This TCP Authorization Form applies to all current and future account(s) with us.

<sup>2. &</sup>quot;We", "us", or "our" refers to RBC Direct Investing Inc®.

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TRUSTED CONT	ACT PERSON 1					
FIRST NAME	LAST NAME	LAST NAME		RELATIONSHIP TO ACCOUNT HOLDER		
MAILING ADDRESS		CITY		PROVINCE	POSTAL CODE	
COUNTRY	TELEPHONE		EMAIL ADDRESS			
TRUSTED CONT	ACT PERSON 2 (OPTIO	ONAL)				
		, <u>,</u>				
FIRST NAME	LAST NAME	LAST NAME		RELATIONSHIP TO ACCOUNT HOLDER		
MAILING ADDRESS		CITY		PROVINCE	POSTAL CODE	
COUNTRY	TELEPHONE		EMAIL ADDRESS			
<b>not</b> wish to name repl	your consent for us to conta acement TCP(s) please leave and return the form to the ac	e the above	TCP designation			
	our current contact information Preferences" under "My Portfo		ally, login to you	r RBC Direct Inv	esting account a	
Once completed, submi	t by mail, fax, or drop off at a	ny RBC Roy	al Bank branch:			
RBC Direct Investing In Royal Bank Plaza 200 Bay Street, North 1						
P.O. BOX 75 Foronto, Ontario M5J 22				PR	INT CLIENT'S NAI	
Fax: 1-888-722-2388 Tel: 1-800-769-2560				Cl	_IENT'S SIGNATU	
				D	OATE (MM/DD/YYY	

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