

## Brighter Future Advisor Plan

# Agent Authorization/Limited Power of Attorney



- Complete this form to designate a financial advisor, individual, corporation, or other entity as your agent with limited authority to act on your Brighter Future Advisor Plan account(s). To grant an agent complete powers to act on your Brighter Future Advisor Plan account(s), please complete the **Power of Attorney Form**.
- You may only designate one level of authorization in **Section 3** for the account(s) listed on this form. To grant a different level of authorization for your other Account(s), please complete a separate form.
- This **Agent Authorization/Limited Power of Attorney Form** must be signed by the Account Owner and notarized in **Section 4**.
- If there is anything about this form that you do not understand, you should consult your lawyer to explain it to you.
- Type in your information and print out the completed form, or print clearly, preferably in capital letters and black ink. Mail the form to the address below. Do not staple.

Forms can be downloaded from our website at [www.BrighterFutureAdvisor529.com](http://www.BrighterFutureAdvisor529.com), or you can call us to order any form — or request assistance in completing this form — at **1.888.529.9552** any business day from 8:30 a.m. to 6:30 p.m. ET.

Return this form and any other required documents to:

**Brighter Future Advisor Plan**  
**P.O. Box 219700**  
**Kansas City, MO 64121-9700**

For overnight delivery or registered mail, send to:

**Brighter Future Advisor Plan**  
**1001 E 101st Terrace, Suite 200**  
**Kansas City, MO 64131**

**IMPORTANT INFORMATION:** THIS LIMITED POWER OF ATTORNEY AUTHORIZES ANOTHER PERSON (YOUR AGENT) TO MAKE DECISIONS CONCERNING YOUR PROPERTY FOR YOU (THE PRINCIPAL). YOUR AGENT CAN MAKE DECISIONS AND ACT WITH RESPECT TO YOUR PROPERTY (INCLUDING YOUR MONEY) WHETHER OR NOT YOU ARE ABLE TO ACT FOR YOURSELF.

THIS DOCUMENT GIVES YOUR AGENT THE POWER TO ACT FOR YOU, WITHOUT YOUR CONSENT, AS YOUR ATTORNEY-IN-FACT, AGENT, AND AUTHORIZED REPRESENTATIVE AS SPECIFIED IN SECTION 3 BELOW. THIS FORM IS LIMITED AND DOES NOT GRANT ALL POWERS CONTAINED IN THE UNIFORM POWER OF ATTORNEY ACT, ARKANSAS CODE TITLE 28, CHAPTER 68. IF YOU HAVE ANY QUESTIONS ABOUT THESE POWERS, OBTAIN COMPETENT LEGAL ADVICE. YOU MAY REVOKE THIS LIMITED POWER OF ATTORNEY AT ANY TIME IF YOU WISH TO DO SO.

YOU SHOULD SELECT SOMEONE YOU TRUST TO SERVE AS YOUR AGENT. YOUR AGENT'S AUTHORITY WILL CONTINUE UNTIL YOU DIE OR REVOKE THE POWER OF ATTORNEY OR THE AGENT RESIGNS OR IS UNABLE TO ACT FOR YOU.

THE PURPOSE OF THIS LIMITED POWER OF ATTORNEY IS TO GIVE THE PERSON YOU DESIGNATE (YOUR AGENT) LIMITED POWERS TO HANDLE YOUR ACCOUNTS WITH THE Brighter Future Advisor Plan, WHICH MAY INCLUDE POWERS TO MAKE INVESTMENT DECISIONS, CONTRIBUTIONS, WITHDRAWALS, AND TAKE OTHER ACTION IN CONNECTION WITH YOUR BRIGHTER FUTURE ADVISOR PLAN ACCOUNTS WITHOUT ADVANCE NOTICE TO YOU OR APPROVAL BY YOU. THIS FORM DOES NOT IMPOSE A DUTY ON YOUR AGENT TO EXERCISE GRANTED POWERS; BUT WHEN POWERS ARE EXERCISED, YOUR AGENT MUST DO WHAT YOUR AGENT KNOWS YOU REASONABLY EXPECT THE AGENT TO DO WITH YOUR PROPERTY, OR IF YOUR AGENT DOES NOT KNOW YOUR EXPECTATIONS, YOUR AGENT MUST ACT IN YOUR BEST INTEREST. YOUR AGENT MUST ACT IN GOOD FAITH, AND IN ACCORDANCE WITH THE PROVISIONS OF THIS FORM AND MUST KEEP COMPLETE RECORDS OF ALL TRANSACTIONS ENTERED INTO AS YOUR AGENT. UNTIL YOU REVOKE THIS LIMITED POWER OF ATTORNEY OR A COURT ACTING ON YOUR BEHALF TERMINATES IT, YOUR AGENT MAY EXERCISE THE POWERS GIVEN HERE THROUGHOUT YOUR LIFETIME, EVEN AFTER YOU BECOME INCAPACITATED.

YOU MAY HAVE OTHER RIGHTS OR POWERS UNDER ARKANSAS LAW NOT SPECIFIED IN THIS FORM.

IF YOU HAVE QUESTIONS ABOUT THIS LIMITED POWER OF ATTORNEY OR THE AUTHORITY YOU ARE GRANTING TO YOUR AGENT, YOU SHOULD SEEK LEGAL ADVICE BEFORE SIGNING THIS FORM.





### 3. Authorization level

I, the Account Owner listed in **Section 1**, appoint the Agent listed in **Section 2**, as my agent (please initial the appropriate level of access that applies to the account(s) listed in **Section 1**).

**Note:** If you have more than one account and you wish to designate different levels of access for your different account(s), complete a separate form for each account.

**Level 1—Account Inquiry Access.** To obtain information about my account(s), and receive duplicate account statements from Brighter Future Advisor Plan.\*

**Level 2—Account Inquiry Access, Contributions, and Exchanges.** To obtain information about my account(s), and receive duplicate account statements from Brighter Future Advisor Plan. To contribute money to the above-referenced account(s) and to move money among Investment Options within each of the above-referenced account(s).\*

**Level 3—Account Inquiry Access, Contributions, Exchanges, and Disbursements.** To obtain information about my account(s), and receive duplicate account statements from Brighter Future Advisor Plan. To contribute money to the above-referenced account(s) and to move money among Investment Options within each of the above-referenced account(s). To withdraw, now or in the future, money from the above-referenced account(s).\*

\* The authority granted herein is limited to the level of authority specified above. My agent shall have no authority to take any other action, including, but not limited to:

- Changing the address of record on my account(s),
- Adding, deleting, or changing any banking information with respect to my account(s),
- Changing the designated beneficiary,
- Signing or e-signing an Account application or otherwise opening a new registration on my behalf, or
- Transferring assets to a new registration.

