



# NEST Direct College Savings Plan Trusted Contact Person Designation Form

- By completing this form, you designate the person identified below as your Trusted Contact Person, and authorize the NEST Direct College Savings Plan and its present and future direct and indirect affiliates, successors and assigns the NEST Direct College Savings Plan to contact your Trusted Contact Person and disclose information about your Plan Account:
  - to address possible financial exploitation;
  - to confirm the specifics of your 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 Financial Industry Regulatory Authority (FINRA) Rules 2165 and 4512.
- **This form does not create or give your Trusted Contact Person a power of attorney. Your Trusted Contact Person will not be able to access your Account or transfer assets to or from your Account.**
- Completion of this form is optional. A Trusted Contact Person must be at least eighteen (18) years of age. You may add, change or remove your Trusted Contact Person online or by using this form.
- 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 listed. Do not staple.

Forms can be downloaded from our website at [www.NEST529Direct.com](http://www.NEST529Direct.com), or you can call us to order any form — or request assistance in completing this form — at **1.888.993.3746** 8 a.m. to 8 p.m. Central time M-F.



**1.888.993.3746**

8 a.m. to 8 p.m. Central time M-F



**www.NEST529Direct.com**



**clientservice@NEST529Direct.com**

Regular mailing address:

**NEST Direct College Savings Plan**

**P.O. Box 30276**

**Omaha, NE 68103-1376**

Overnight mailing address:

**NEST Direct College Savings Plan**

**920 Main Street, Suite 900**

**Kansas City, MO 64105**

## 1 Current Account Owner Information

**Note: If you have not established an account, please complete and enclose an Enrollment Form.**

Account Number (First nine digits)

Name of Account Owner (first, middle initial, last)

Telephone Number (In case we have a question about your Account.)

## 2 Action for Trusted Contact Person

 Add Remove Change

\* NEST DIR TRUSTED CONTACT \*

