





### 3. Bank Information

- Complete this section if you are adding a Recurring Contribution to your Account or if you are changing your bank account information.
- Recurring Contributions can be made only through Accounts held by a U.S. bank, savings and loan association, or credit union that is a member of the Automated Clearing House (ACH) network. Money market mutual funds and cash management accounts offered through non-bank financial companies cannot be used.
- This bank account information will be available across all Beneficiaries within the same Account string.

**Important:** I acknowledge that my bank or financial institution is located in the U.S. and/or adheres to U.S. banking regulations.

Bank Name

Bank Routing Number

Bank Account Number

Account Type  
(Check One.)  Checking  Savings

**Note:** The routing number is usually located in the bottom left corner of your checks. You can also ask your bank for the routing number. The named Bank Account Owner(s) must authorize this Recurring Contribution by signing below (if different than the 529 Account Owner).

#### Name(s) on Bank Account

Bank Account Owner (First name)

(M.I.)

Bank Account Owner (Last name)

Signature of Bank Account Owner

Date (mm-dd-yyyy)

Joint Bank Account Owner (First name)

(M.I.)

Joint Bank Account Owner (Last name)

Signature of Joint Bank Account Owner

Date (mm-dd-yyyy)



## 5. Automatic Dollar-Cost Averaging Program *(Optional)*

Automatic dollar-cost averaging allows you to reallocate from one Portfolio to one or more other Portfolios within your Account on a pre-scheduled basis.

- To start automatic dollar-cost averaging you must make a lump sum contribution to an initial Portfolio (*Source Portfolio*), and at the time of the contribution, designate automatic periodic allocations to one or more other Portfolios (*Target Portfolio*).
- Your entire initial deposit does not need to be included in the automatic dollar-cost averaging.
- Creating an automatic dollar-cost averaging at the time of enrollment will NOT count towards your twice per calendar year Portfolio change limit. To start automatic dollar-cost averaging at the time of enrollment you must mail a contribution check with this completed form to the Program.
- If you make any changes to or cancel an established automatic dollar-cost averaging it will count towards your twice per calendar year Portfolio change limit.

**Amount:** \$   ,     .   0 0  
Amount

**Frequency** *(Select one.):*  **Monthly**  **Quarterly** *(Based on established date, not calendar quarter.)*

**Start Date:\***   —   —      
Date (mm/dd/yyyy)

\* The Program must receive instructions at least 3 business days prior to the indicated start date. Please review your quarterly statements for details of these transactions. If the date is not specified, this option will begin the month following the receipt of this request, on the 15th day of the month.

**Stop Type** *(Select one.):*

**Stop Date**   —   —      
Date (mm/dd/yyyy)

**When total amount of Reallocation equals:** \$    ,     .   0 0

**When Complete Balance of the Source Portfolio is depleted.**

**Source Portfolio:**

**Target Portfolio:**

Portfolio

\$   ,     .   0 0  
 Dollar Amount

Portfolio

\$   ,     .   0 0  
 Dollar Amount

Portfolio

\$   ,     .   0 0  
 Dollar Amount

**6. Signature— YOU MUST SIGN BELOW**

- I certify that I have read and understand, consent, and agree to all the terms and conditions of the WA529 Invest Program Details Booklet as they relate to adding, deleting, or changing financial features.
- By signing below, I authorize WA529 Invest or its designee to add, delete, or change financial features according to the instructions above.
- If I have added or changed banking information in **Section 3**, I certify that I have authority to transact on the bank account so indicated.
- If the Account is owned by an entity or trust, I certify that I am authorized to act on its behalf in making this request. If the Account is funded with UGMA/UTMA assets, I further certify that I am the parent/guardian/custodian of the Account identified in **Section 1**.
- I certify that the information provided herein is true and complete in all respects. I understand that all changes made on this form supersede all my previous designations.
- You should be aware that by providing banking information, you also authorize the Program to automatically provide certain capabilities in connection with your Account(s). This includes the ability to authorize withdrawals from your Accounts via telephone or through **529invest.wa.gov** provided your banking information has been on file for a minimum of 30 days. Do not provide your banking information if you do not wish to activate these capabilities. If you wish to remove these capabilities from your Account(s), you must delete your banking information.
- If I have chosen the Recurring Contribution option, I authorize the WA529 Invest and its designees, upon telephone or online request, to pay amounts representing redemptions made by me or to secure payment of amounts invested by me, by initiating credit or debit entries to my account at the bank named in **Section 3**. I authorize the bank to accept any such credits or debits to my account without responsibility to their correctness. I acknowledge that the origination of ACH transactions involving my bank account must comply with U.S. law. I further agree that none of the WA529 Invest, the State of Washington, the Washington Student Achievement Council, TIAA-CREF Tuition Financing, Inc., Ascensus College Savings Recordkeeping Services, LLC and its affiliates will incur any loss, liability, cost, or expense for acting upon my telephone or online request. I understand that this authorization may be terminated by me at any time by notifying WA529 Invest and the bank by telephone or in writing, and that the termination request will be effective as soon as WA529 Invest and the bank have had a reasonable amount of time to act upon it. I certify that I have authority to transact on the bank account identified by me in **Section 3**.

SIGNATURE   
 Signature of Account Owner

—  —   
 Date (mm-dd-yyyy)