

FIRESTONE FEDERAL CREDIT UNION – TRUSTED CONTACT AUTHORIZATION

By signing this form, I authorize Firestone Federal Credit Union to contact the individual(s) identified below as my Trusted Contact(s) in the event of a situation described below regarding any or all accounts I have with Firestone Federal Credit Union.

If Firestone Federal Credit Union has questions or concerns about my health (capacity and well-being, etc.) or welfare (financial exploitation), exploitation, or is unable to contact me, it may:

- Contact my Trusted Contact(s) and disclose information about me and my accounts to discuss possible financial exploitation.
- Confirm with my Trusted Contact(s) my current contact information or health status and/or the identity of any legal guardian, executor, trustee, or holder of a power of attorney.

I understand that: (1) I authorized FFCU to contact my Trusted Contact(s) for any account I may have with FFCU; (2) I may identify multiple contact person (if needed, use additional copies of this form to list additional Trusted Contacts); (3) FFCU is not required to contact, or attempt to contact, my Trusted Contact person(s); (4) **This Authorization is optional and I may withdraw it at any time by notifying FFCU in writing;** and (5) I may change or amend my Trusted Contact(s) at any time by providing FFCU a newly-signed Trusted Contact Authorization Form, and that this new form **will supersede** any previous form on file.

The Trusted Contact must be at least 18 years old.

Please note that every account owner who elects to provide Trusted Contact Information must complete and sign his or her own Trusted Contact Authorization form.

| | |
|---------------|------------------------|
| Account Owner | Social Security Number |
|---------------|------------------------|

| | |
|--------------------------|--|
| Name of Trusted Contact* | Relationship (e.g., spouse, child, lawyer, friend, etc.) |
|--------------------------|--|

| | |
|-----------------------|--------------------------------|
| Trusted Contact Phone | Trusted Contact E-mail Address |
|-----------------------|--------------------------------|

| | | | |
|---------|--|--|--|
| Address | | | |
|---------|--|--|--|

| | | | |
|------|----------------|-----------------|---------|
| City | State/Province | Zip/Postal Code | Country |
|------|----------------|-----------------|---------|

| | |
|--------------------------|--|
| Name of Trusted Contact* | Relationship (e.g., spouse, child, lawyer, friend, etc.) |
|--------------------------|--|

| | |
|-----------------------|--------------------------------|
| Trusted Contact Phone | Trusted Contact E-mail Address |
|-----------------------|--------------------------------|

| | | | |
|---------|--|--|--|
| Address | | | |
|---------|--|--|--|

| | | | |
|------|----------------|-----------------|---------|
| City | State/Province | Zip/Postal Code | Country |
|------|----------------|-----------------|---------|

| | |
|------------------|------------|
| Member Signature | Print Name |
|------------------|------------|

| |
|------|
| Date |
|------|

Check here if this Trusted Contact Person form supersedes previous Trusted Contact Person form(s)

FIRESTONE FEDERAL CREDIT UNION
TRUSTED CONTACT PERSON AUTHORIZATION

Firestone Federal Credit Union encourages you to designate a trusted contact person by completing this authorization.

What is a trusted contact person?

A trusted contact person(s) is an individual (age 18 or older) identified by you, whom FFCU could contact and disclose information about your account:

- To address possible financial exploitation
- To confirm specifics of your current contact information, health status, or the identity of any legal guardian, executor, trustee, or holder of power of attorney,
- As otherwise permitted by Financial Industry Regulatory Authority Rule 2165 (Financial Exploitation of Specified Adults).

Trusted Contact Designation

- Naming a Trusted Contact is optional
- The trusted contact(s) will not be able to view your account information, execute transactions, or inquire about account activity,
- We suggest that your Trusted Contact(s) not be already authorized to transact business on your account(s) or already be able to receive information about your account(s) (Power of Attorney).
- You do not need to designate a separate Trusted Contact for each of your accounts. A single designation covers all your FFCU accounts of which you are the account holder or joint account holder.
- Each account holder will need to complete their own Trusted Contact Authorization.

**If you have any questions or would like help completing the authorization,
contact our office at 234-352-1100 or 888-740-8351**

Return this completed authorization to:

**Firestone Federal Credit Union
31 Hanna Parkway
Akron, OH 44319**