

CHECKING ACCOUNT APPLICATION

Institutional Advisor Services



SECTION 1: Request Type

Axos Advisor Services Account Number

A. REQUEST TYPE

Select one:

- New Checking Account
- Change Information or Replace Authorized Signers
- Close Checking Account

(Note: Complete Section 2A and 2B and sign Section 4)

Important: The information provided in Section 3 of this form supersedes and replaces all existing authorized signers. If you would like to change authorized signers, provide a complete list of authorized signers for your account, not just additions or deletions.

SECTION 2: Account Registration

Important: Complete this section of the application with the same account type and account registration as your Axos Advisor Services Custodial account. *Note: Checking account address will be the current mailing address for the Custodial account listed in this section.*

- A. ACCOUNT TYPE:** Individual Joint Trust Corporate Company/Association LLC LLP Partnership
 Qual/Retirement

**Checking is only available for those qualified/retirement plans where Axos Advisor Services does not provide Form 1099-R reporting*

ACCOUNT REGISTRATION

Account Title (as it appears on your Axos Advisor Services statement)	
Account Title (continued)	
Custodial Account Number	Last 4 Digits of SS# or TIN

SECTION 3: Authorized Check Signers

By signing, I acknowledge that I have read the Terms and Conditions in Section 5 and that I agree to them. All authorized signers on the check account must provide a sample signature.

SIGNATURE #1

Print Name

SIGNATURE #2

Print Name

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SECTION 4: Withdrawal Authorization

By signing this form, I acknowledge that I have read the Terms and Conditions in Section 5 and that I agree to them. I authorize Axos Advisor Services to honor checks signed by any one of the check signers designated in Section 3. This authorization will remain in effect until cancelled in writing by me/us or until my Axos Advisor Services Custodial account is terminated.

Account Owner or Authorized Party Signature	Date
Print Name	

By signing as an authorized party for a corporate, company, association, LLC, LLP, LP, general partnership or retirement plan account, I certify that I am authorized to act individually and independently, without the consent of other officers, partners or trustees for all purposes related to the Custodial account and Checking account with Axos Advisor Services.

Joint Owner Signature, if applicable	Date
Print Name	

SECTION 5: Terms and Conditions

INTRODUCTION: This Agreement contains the terms and conditions of the Checking account between the Customer(s) ("I/my") named on page one and Axos Advisor Services. A Checking account is an account established at UMB Bank (the Bank) for the Customers(s) named on page one. The purpose of this agreement is to authorize the Bank to establish this account for my use as described further in this agreement. By signing this document, I agree that this account shall be governed by applicable banking laws, customs and regulations and by the by-laws, rules, and regulations of the Bank in force and as amended from time to time.

ACCOUNT PURPOSE AND ACTIVITY: Upon my signing this Agreement and the Bank's opening of my Checking account, the Bank will accept for processing checks imprinted with my name and address. Subject to certain restrictions, as outlined in the section titled Account Restrictions, the Bank agrees to process these checks on my behalf by presenting them to Axos Advisor Services as a means of authorizing Axos Advisor Services to distribute the amount of my check from my Custodial account at Axos Advisor Services to my Checking account.

ACCOUNT RESTRICTIONS:

- Checks shall not exceed 50% of the account value.
- Only the original checks, or certified or guaranteed copies thereof, will be acceptable as debits to this account.

INSUFFICIENT FUNDS: In the event that I should have insufficient funds in my Custodial account with Axos Advisor Services to honor the distribution, I/we authorize Axos Advisor Services to reallocate my/our account to meet the distribution request. I recognize that Axos Advisor Services reserves the right to refuse any check if I/we should have insufficient funds to cover the request for distribution amount.

RETURNED ITEMS: If a check (request for disbursement) should be refused by Axos Advisor Services because I do not have sufficient funds in my Axos Advisor Services Custodial account, or because I fail to maintain a current disbursement authorization form on file with Axos Advisor Services, then the Bank will return the check. Any electronic debit will be rejected and returned to the originator.

COPIES OF CHECKS: I understand that original checks will not be returned to me. I may request a copy of a check by providing my Axos Advisor Services account number, check number, issue date, amount, and payee in writing, either by regular mail or email, to Axos Advisor Services.

CONFLICTING DEMAND/DEATH: In the event of conflicting demands of signatories, the Bank may require the signature of all of the signers. Upon the death or disability of any of the parties, Axos Advisor Services must be notified at once and all withdrawals thereafter shall be upon the combined signatures of the representatives (or other person legally entitled) of the person deceased or disabled and the remaining signers. The Bank will be protected in paying on the signatures otherwise provided for herein until such time as it receives proper written notice of such death or disability.

MODIFICATIONS: I agree that Axos Advisor Services has the right to amend this Agreement at any time by sending me advance written notice of such amendment, including discontinuing any features of this Checking account. My use of the checks following receipt of such notification shall constitute my acceptance of the modification(s).

TERMINATION: I may terminate the Checking account at any time upon written notification to Axos Advisor Services. Axos Advisor Services or the Bank may terminate the Checking account upon written notification to the Account Owner. Termination of the account does not reduce the obligations which rose from activities occurring prior to account termination. If my account is terminated for any reason I will promptly destroy or return any unused checks to Axos Advisor Services.

FEES:

One-time Set-up Fee.....\$35.00
Checkbook Re-Order Fee.....\$20.00
Insufficient Funds Fee.....\$25.00

- End of Form -