

TRUSTED CONTACT PERSON FORM

Candor Financial Group Inc. encourages you to designate a Trusted Contact Person (TCP) by completing this form.

CLIENT ID

ACCOUNT NUMBER

DEALER / REP CODE

ACCOUNT INFORMATION

Client Last Name

Client First Name

Email Address

Phone Number

TRUSTED CONTACT PERSON INFORMATION

Surname

First Name and Initials

MALE

FEMALE

OTHER

Relationship to Client (Spouse, Relative, Friend, Professional, Other)

Street (Apt./Unit)

City

Province

Postal Code

Home Phone

Work Phone

Mobile Phone

Email

What is a Trusted Contact Person? A trusted contact person is an individual (age 18 or older) identified by you, whom Candor could contact and disclose personal information about you and your account(s) for any of the following purposes.

- To address concerns that you are being financially exploited
- To address concerns about your mental health or diminished capacity
- To confirm current contact information if Candor is unable to locate you after repeated attempts
- To confirm any specifics about your health status, whether physical, mental or emotional
- To confirm any concerns about a sudden or significant change in your decision-making style or your overall awareness of investing concepts if these are significantly different from past interactions and a sudden change is noticed
- To help identify any legal guardian, executor, trustee or holder of a Power of Attorney (POA)

Who Should I Name as my Trusted Contact Person? The person(s) you name as your TCP should be:

- An adult (typically a family member, close friend or caregiver) who is over the age of majority
- A person that you trust with your personal and financial information
- A person who does not have an interest in your accounts or assets (such as a beneficiary) and would not be involved in making financial decisions with respect to your accounts (such as a POA)

I understand that by signing this form:

1. I authorize Candor to contact my trusted contact(s) for any accounts I may have with Candor
2. I authorize Candor to discuss any of my personal information with my named trusted contact person(s)
3. Candor is not required to contact my trusted contact person(s) but may at their discretion contact one or more people I have designated as trusted contact person(s)
4. As the account owner I may identify multiple Trusted Contact(s)
5. This authorization form is optional and I may withdraw it at any time by communicating this to my Candor Agent in writing
6. At any time I may change or amend this Trusted Contact Form. As the account owner I must notify my Candor Agent in writing by submitting a new Trusted Contact Form. Any prior form will be considered void.

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

Check here if you wish to instruct Candor to remove my existing Trusted Contact Person and do not wish to add a replacement at this time.

I acknowledge Candor may disclose personal information about me to my next of kin and/or my authorized representative(s) for the purpose of preventing and investigating financial abuse against me or my account(s). I further authorize Candor or its representatives to contact this person in case of an emergency or if they are concerned about my financial well-being. I agree this authorization does not constitute a power of attorney or mandate to manage my affairs.

CLIENT SIGNATURE

ADVISOR SIGNATURE

COMPLIANCE SIGNATURE

DATE (DD/MM/YYYY)

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