

✓ **Select the frequency of your contributions.**

If none selected, then your bank withdrawals will occur monthly.

<input type="checkbox"/> Bi-weekly	<input checked="" type="checkbox"/> Monthly	<input type="checkbox"/> Quarterly
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✓ **Select the month(s) of your contributions.**

If none selected and your frequency is quarterly, then your bank withdrawals will occur every calendar quarter.

<input checked="" type="checkbox"/> Every Month (or →)	<input type="checkbox"/> Jan.	<input type="checkbox"/> Feb.	<input type="checkbox"/> Mar.
	<input type="checkbox"/> Apr.	<input type="checkbox"/> May.	<input type="checkbox"/> Jun.
	<input type="checkbox"/> Jul.	<input type="checkbox"/> Aug.	<input type="checkbox"/> Sep.
	<input type="checkbox"/> Oct.	<input type="checkbox"/> Nov.	<input type="checkbox"/> Dec.

✓ **Select the date(s) of your contributions.**

If none selected, then your bank withdrawals will occur on the fifth of each month or quarter selected above.

<input type="checkbox"/> 5th	<input checked="" type="checkbox"/> 20 th	<input type="checkbox"/> Other _____
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4 Banking Information

You must provide the following information if you choose to contribute through the Automatic Contribution Plan (ACP) or the Electronic Purchase Option. Separate withdrawals from your bank account will be made for each Investment Option you have selected. Please attach a pre-printed, voided check or pre-printed deposit slip to this form.

Type of Account (check one):		<input checked="" type="checkbox"/> Checking	<input type="checkbox"/> Savings
Account Number:		Routing Number:	
012-987654		123456789	
Name(s) on Account <i>(The Account Owner, Custodian or Entity name must appear on the bank account.)</i>			
John A Sample and Mary J Sample			
Bank Name:		Telephone Number:	
Citizens Savings		404-555-3952	

5 Signature and Authorization *(You must sign this section for these changes to take effect.)*

By signing this form, you authorize the *Path2College 529 Plan* to debit your bank account and to deposit such funds into your Plan Account, or to cease such debits, as requested on this form. If you authorize contributions through the Automatic Contribution Plan (ACP) or the Electronic Purchase Option on this form, you also hereby authorize the financial institution holding the bank account to debit without responsibility for the accuracy of the transaction. You further agree that neither the *Path2College 529 Plan* nor its agents will be liable for any loss, liability, cost or expense for acting upon these instructions, except to the extent required by applicable law.

For Entity Accounts, e.g. *Trusts, Estates, Business Entities, IRC 501(c) (3) Organizations, or State/Local governments.*

If I am signing on behalf of an entity, I certify that I am authorized by the entity Account Owner identified in Section 1 to act on its behalf and I have attached the appropriate documentation to substantiate authorization for this transaction.

John A Sample

March 10, 2008

Account Owner, Custodian or Authorized Representative of Entity

Date

Mail this form to:

Path2College 529 Plan
P.O. Box 105307
Atlanta, GA 30348-5307



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List of Approved Documents for Substantiation by Entity Account Owners

Substantiation is required from an entity Account Owner when opening a Plan Account or when conducting a transaction for that Account. Such documentation must include the following:

- **the legal status of the entity;**
- **authorization by the entity to open the Account or conduct the transaction; and**
- **authorization by the entity for the signer of the form to open the Account or conduct the transaction.**

The same document may provide substantiation of all of the three required elements.

The documents set forth below meet these substantiation requirements and must be original or certified documents, dated no more than 60 days prior to receipt by the Plan.

1. A corporate by-law extract or corporate resolution certified by an officer of the corporation (other than an individual authorized thereby to act as signer for the corporation's Account), with raised seal if in use by the corporation;
2. A certificate signed by the owner of a sole proprietorship;
3. A certificate signed by a general partner of a partnership (other than an individual authorized by the certificate to act as signer for the partnership's Account);
4. A certificate signed by an officer of a limited liability company, other company or association (other than an individual authorized by the certificate to act as signer for the Account of the limited liability company, other company or association);
5. A certificate signed by the chief executive officer of a state or local government agency;
6. A certified copy of a court order establishing an estate and naming a legal representative of the estate that is authorized to act as a signer of the Account of the estate;
7. A certificate signed by the trustee of a trust, a court order, or a certified copy of the portion(s) of a trust instrument, that confirms the creation of the trust and the identity of the trustee, and provides authorization for the trustee to act as a signer for the Account of the trust;
8. A letter or memorandum from the Internal Revenue Service indicating that the entity is an organization described in Section 501(c)(3) of the Internal Revenue Code;
9. An original memorandum exhibiting the appropriate letterhead and containing the holographic signature of any one of the following: (a) the chief executive officer of a corporation or limited liability company; (b) the general partner of a partnership; (c) the owner of a sole proprietorship; or (d) the chief executive officer of a state or local government agency; or
10. If the entity Account Owner is unable to provide substantiation in any of the foregoing forms, the entity Account Owner may propose an alternate form of substantiation to the Plan administrator's designee for consideration. The Plan administrator's designee must review the alternate form of substantiation for authenticity and completeness and must accept or reject it.
 - ***If judged authentic and complete***, the Plan administrator's designee must act on the alternate form of substantiation within 30 business days of so determining.
 - ***If judged inauthentic or incomplete***, the Plan administrator's designee must notify the Account Owner of the rejection of the alternate form of substantiation and set forth the reason for such determination in writing within 30 business days of so determining.

Please retain a copy of this notice with your records.