

Combined Statements/Mailings

Use this form to reduce mail volume by combining multiple accounts at the same address for statement and account mailing purposes. Type on screen or fill in using CAPITAL letters and black ink. If you need more room for information or signatures, make a copy of the relevant page.

Helpful to Know

- ALL accounts must be at the same address in order to be combined for statement/mailing purposes.
- If any account owner/authorized individual changes an address on an account identified for inclusion within a combined statement/mailing group, ALL accounts included within the group may be updated to reflect the address change.
- All individual account statements will be replaced by a single, combined statement addressed to the owner(s) of the primary account.
- ALL owners of accounts in the household will be able to view the combined statement online.
- To remove an account from a combined statement/mailing group, contact a Fidelity representative.
- For ABLE accounts, the Person with Signature Authority (PSA) must sign this form. If there is not a PSA, the Designated Beneficiary must sign.

Accounts that can be combined

- Individual/Joint, including Transfer on Death registrations
- UGMA/UTMA (Custodial)
- IRA (Traditional, Roth, Rollover, Inherited, SEP, SIMPLE)
- Fidelity Retirement Plan (Keogh)
- 529 College Savings Plan
- Employee Stock Option Plan (ESOP)
- Fidelity BrokerageLink® accounts whose account number begins with 650
- Trust
- Fidelity Private Client Group®
- Fidelity Go®
- Fidelity® Strategic Disciplines
- Fidelity® Wealth Services
- Health Savings Accounts (HSA)
- ABLE Account

Accounts NOT eligible to be combined

- Business, sole proprietor, partnership, or other entity accounts (except trusts)
- 401(k), 403(b), 457, or other workplace retirement plans
- Investment-Only retirement accounts (Non-Prototype)

1. Account Owners/Authorized Individuals

ALL owners of ALL accounts must be listed here and must sign in Section 4.

Trust and UGMA/UTMA: Provide names of authorized individuals.

Name
Name
Name
Name

2. Accounts to Combine Check ONLY one option.

If you choose this option, provide the SSN/TIN for each owner listed above, then skip to Section 3.

☐ ALL eligible accounts associated with the following numbers:

Social Security or Taxpayer ID Number	Social Security or Taxpayer ID Number
Social Security or Taxpayer ID Number	Social Security or Taxpayer ID Number

If you choose this option, we will ONLY combine mailings for the account numbers listed here.

☐ ONLY these accounts:

Account Number	Account Number	Account Number
Account Number	Account Number	Account Number
Account Number	Account Number	Account Number

See "Helpful to Know" (above) to be sure each account you list is eligible.

Form continues on next page. ►►

3. Signatures and Dates *ALL owners/authorized individuals must sign and date.*

By signing below, you:

- Authorize Fidelity to act on all instructions given on this form.
- Authorize Fidelity to update the address on all accounts in a combined statement/ mailing group, based on an address change request submitted by an account owner/ authorized individual, with respect to any account identified for inclusion within that group.
- Consent to the use of electronic signatures in connection with all matters relating to your account(s) and agree that your use of an electronic signature shall bind you in the same manner as if you had manually signed such document.
- Accept all terms and conditions described in this form.
- Certify that all information you provided is true, accurate, and complete.
- Indemnify and hold harmless Fidelity from any loss, claim, expense, or other liability for any instructions given to Fidelity in connection with combined statements and combined mailings as defined on this form.
- Acknowledge that the information on any combined statements and combined mailings will be available to each individual who signs below, including on *Fidelity.com*.
- Authorize Fidelity to provide duplicate copies of confirmations and statements, or the transactions data contained therein, for your account(s) and any accounts you choose to have on a consolidated statement to the employers of any individual signing below as required by applicable law.

PRINT OWNER/AUTHORIZED INDIVIDUAL NAME	
OWNER/AUTHORIZED INDIVIDUAL SIGNATURE	DATE MM/DD/YYYY
SIGN X	

PRINT OWNER/AUTHORIZED INDIVIDUAL NAME	
OWNER/AUTHORIZED INDIVIDUAL SIGNATURE	DATE MM/DD/YYYY
SIGN X	

PRINT OWNER/AUTHORIZED INDIVIDUAL NAME	
OWNER/AUTHORIZED INDIVIDUAL SIGNATURE	DATE MM/DD/YYYY
SIGN X	

PRINT OWNER/AUTHORIZED INDIVIDUAL NAME	
OWNER/AUTHORIZED INDIVIDUAL SIGNATURE	DATE MM/DD/YYYY
SIGN X	

Did you print and sign the form? Send the form to Fidelity.

Questions? Go to *Fidelity.com* or call 800-343-3548.

Regular mail

Fidelity Investments
PO Box 770001
Cincinnati, OH 45277-0002

Overnight mail

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Covington, KY 41015

On this form, "Fidelity" means Fidelity Brokerage Services LLC and its affiliates. Brokerage services are provided by Fidelity Brokerage Services LLC, Member NYSE, SIPC. 576562.9.0 (06/26)