

CollegeAdvantage Direct 529 Savings Plan

Power of Attorney



- Complete this form to designate a Financial Advisor (*as defined in the CollegeAdvantage Direct 529 Savings Plan Offering Statement and Participation Agreement*) or individual as your Agent with the complete authority to act on your CollegeAdvantage Direct 529 Savings Plan (CollegeAdvantage Direct) Account(s). To grant an agent limited powers to act on your CollegeAdvantage Direct Account(s) please complete the Agent Authorization/Limited Power of Attorney Form.
- This Power of Attorney form must be signed by the Account Owner and notarized in **Section 4**.
- If there is anything about this form that you do not understand, you should consult with your own attorney to explain it to you.
- Type in your information and print out the completed form, or print clearly, preferably in capital letters and black ink. Mail the form to the address below. Do not staple.

Forms can be downloaded from our website at www.CollegeAdvantage.com, or you can call us to order any form — or request assistance in completing this form — at **1-800-AFFORD-IT** (233-6734) Monday through Friday from 8:30 a.m. to 6 p.m. Eastern Time.

Return this form and any other required documents to:

CollegeAdvantage Direct 529 Savings Plan
P.O. Box 219305
Kansas City, MO 64121-9305

For overnight delivery or registered mail, send to:

CollegeAdvantage Direct 529 Savings Plan
1001 E 101st Terrace, Suite 200
Kansas City, MO 64131

NOTICE: UNLESS YOU LIMIT THE POWER IN THIS DOCUMENT, THIS DOCUMENT GIVES YOUR AGENT THE POWER TO ACT FOR YOU, WITHOUT YOUR CONSENT, IN ANY WAY THAT YOU COULD ACT FOR YOURSELF. THE POWERS GRANTED BY THIS DOCUMENT ARE BROAD AND SWEEPING. THEY ARE EXPLAINED IN CHAPTER 1337 OF THE OHIO REVISED CODE. IF YOU HAVE ANY QUESTIONS ABOUT THESE POWERS, OBTAIN COMPETENT LEGAL ADVICE. YOU MAY REVOKE THIS POWER OF ATTORNEY IF YOU LATER WISH TO DO SO.

THE PURPOSE OF THIS POWER OF ATTORNEY IS TO GIVE THE PERSON YOU DESIGNATE (YOUR "AGENT") BROAD POWERS TO HANDLE YOUR ACCOUNTS WITH THE COLLEGEADVANTAGE DIRECT 529 SAVINGS PLAN PURSUANT TO CHAPTER 1337 OF THE OHIO REVISED CODE, WHICH MAY INCLUDE POWERS TO MAKE INVESTMENT DECISIONS, CONTRIBUTIONS, WITHDRAWALS, AND TAKE OTHER ACTION IN CONNECTION WITH THE COLLEGEADVANTAGE DIRECT 529 SAVINGS PLAN WITHOUT ADVANCE NOTICE TO YOU OR APPROVAL BY YOU. THIS FORM DOES NOT IMPOSE A DUTY ON YOUR AGENT TO EXERCISE GRANTED POWERS; BUT WHEN POWERS ARE EXERCISED, YOUR AGENT MUST USE DUE CARE TO ACT FOR YOUR BENEFIT AND IN ACCORDANCE WITH THE PROVISIONS OF THIS FORM AND MUST KEEP COMPLETE RECORDS OF ALL TRANSACTIONS ENTERED INTO AS YOUR AGENT UNTIL YOU REVOKE THIS POWER OF ATTORNEY OR A COURT ACTING ON YOUR BEHALF TERMINATES IT. YOUR AGENT MAY EXERCISE THE POWERS GIVEN HERE THROUGHOUT YOUR LIFETIME, EVEN AFTER YOU BECOME DISABLED.

YOU MAY HAVE OTHER RIGHTS OR POWERS UNDER OHIO LAW NOT SPECIFIED IN THIS FORM.



