Institutional Trust Online Services Application (User Profile)

(* Indicates required fields)

To apply for access to any of Comerica's Institutional Trust Online Services you must provide User Profile information by completing all the areas shown below. Complete this page for yourself first. After you print this page, you will be given the opportunity to add access to your account(s) for other internal users or third parties such as your Investment Managers.

| User Profile Information | on | | | | |
|---|---|---|--|---|--|
| User Name:* | | | | | - |
| Association to Client:* | | | | | - |
| Online Services Requested: | * Custody Online Custom Reports | | | | |
| | Ben | efit Payments | PAC Manag | er Online | |
| How would you like us to d | ontact you? | | | | |
| Preferred Method:* | Email | Fax | Telephone | Postal Service | |
| Email Address:* | | | | | - |
| Country:* | | | | | - |
| Zip Code:* | | | | | _ |
| Phone Number:* (|) | | Extension: | | - |
| Best time to contact you (ES | T): | | <u></u> | | |
| Fax Number:* (|) | | | | |
| Please enter company info | rmation below: | | | | |
| Company Name:* | | | | | - |
| Address Line 1:* | | | | | - |
| Address Line 2: | | | | | - |
| City:* | | | | | - |
| State:* | | | | | - |
| Unique Identifier:* | | | | | - |
| Please provide the make and model assistance. | of your first car owned | as a unique identifie | er. This information may l | pe used to help verify your id | dentity, should you require |
| Authorization By signing below, I authorize designated above for access written notice to the Bank. I protection and use of User ID misuse of the User ID or pass any such use, misuse, or access | s to my Account(s also understand t D and passwords sword nor access |). I understand that I am solely assigned to oth | that I may revoke th responsible for allow er users. I agree tha | is person's access to ving access to my Acc at the Bank has no lial | the Account(s) by count(s) and the bility for use or |
| Signature | re Date (Authorized Signer for Account) | | | | |
| (A | Authorized Signer | for Account) | | | |
| | | BANK U | SE ONLY | | |
| List of Account(s) or Relat | ionships: | | | | |
| | | | | | |
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