



Questions? Call 1-888-467-3523

Schedule A

<u>Instructions</u>: This document should be completed in addition to the **MSDLAF+ Trusteed Account Application** when a Trustee is opening a Trustee-held Account for the benefit of an Investor. Please have all three interested parties sign and date this document. Once completed, submit this form through Connect, or fax or mail this form to the fax number or address at the bottom of this page.

			MSDLAF+ Account #:	(Fund Use Only)			
CH	EDULE A DETAIL: (Please read, cor	nplete, sign and date this section.)		(Fulla ose only)			
Tru	ustee-held Account should be oper	ned in MSDLAF+. The undersigned hereby ackno	owledge:				
1.	The Account is for the benefit of	the following Investor:					
	(Enter the name of the MSDLAF+ Investor.)						
2.	The undersigned reviewed, and are familiar with, the relevant trust document. A copy of the first page of the trust document is attached.						
3.	3. Based on our review of the trust document, we have determined or confirmed that:						
	a. The Fiduciary, Trustee, or F	iscal Agent which has been appointed under the					
	h MCDIAE, is an authorized i			ry, Trustee or Fiscal Agent.)			
	 b. MSDLAF+ is an authorized i in the Fund. 	nvestment under the trust document, and the ⁻	rustee is authorized to open the Acco	ount in the Fund and to invest			
Inve	•	I held in the name of the Trustee for the benef n with respect to opening and closing the Acco DLAF+ shares. Title		•			
Trus	stee, Fiduciary, or Fiscal Agent	Title	Signature	Date			
UN	ID USE ONLY:						
MSI	DLAF+ Representative	Title	Signature	Date			
EQ	UIRED DOCUMENTATION: (Plea	ase include the following required documents with this	Schedule A.)				
	New Investor Application ONLY FOR NEW INVESTORS)	Trusteed Account Application	• Trust Document (A co	py of the first page)			
• C	Contact Record (New Contacts Only	Permissions					

Any document containing sensitive information received by email will not be accepted. Please send by uploading through Connect, fax, or mail.						
SEND VIA CONNECT:	Log in to Account Access	FAX TO:	MSDLAF+ Client Services Group	MAIL TO:	MSDLAF+ Client Services Group	
Existing Connect	Click Secure Contact		1-888-535-0120		P.O. Box 11760	
Users Only	Select file to upload - Send message				Harrisburg, PA 17108	

FUND U	FUND USE ONLY				
V2022.04	INITIALS				
Processed					
Confirmed					