



Client Select Series
Merrill Automated Funding Service Enrollment/ Change
Authorization Form

Complete and submit all pages of this form to enroll in the Merrill Automated Funding Service (AFS) or to update your current AFS amount for an existing NextGen 529 Account. Return it together with a voided check from your checking account or a bank letter (see Section 2). We will confirm that your financial institution can accept this AFS instruction through participation in the Automated Clearing House (ACH). There is no charge for enrolling in the AFS or for each transfer you request.

1. NextGen 529 Account Information

Participant Name (Last/First/M.I.) _____

NextGen 529 Account Number _____

Last four digits of Participant's Social Security Number _____

Please select one New instruction Update Termination

2. Automated Funding Service (AFS)

You can make regular contributions to your NextGen 529 Account by enrolling in AFS. For Participants electing to have contributions invested in more than one Portfolio, the minimum initial and subsequent investment is \$25 per Portfolio. Debits from the account will begin on the date specified below and will occur on the same day of the month thereafter. Requests to establish automated contributions must be received at least 10 business days before the specified beginning date in order for contributions to begin in the following month. If the day of the month you specify is a Saturday, Sunday or holiday, the debit will occur on the prior business day. Refer to the NextGen 529 Program Description for details concerning AFS. **Please Note: If the account indicated below does not have the exact name (and Social Security No.) as it appears in Section 1 of this form, additional documentation may be required.**

(a) AFS from a Merrill account.

For existing Merrill clients only:

Please indicate your Merrill account number: _____

(b) Bank of America® account

Your Bank of America account number _____

ABA routing number (OR the state in which your account was opened) _____

* A valid ABA routing number will be required if the account was opened in the following states as these states can have multiple routing numbers: CA, FL, IL, IN, MI, MO and TX.

(c) Outside financial institution (Preprinted check REQUIRED)

Name of outside financial institution _____

Outside financial institution account number _____

Outside financial institution account to be debited:

Checking (Enclose a preprinted, voided check for the account.)

Savings (Enclose either a preprinted, voided check for the account or a letter of authorization from your financial institution.)

Other (Enclose either a preprinted, voided check for the account or a letter of authorization from your financial institution.)

* If you don't have a preprinted check you must provide a letter of authorization that must be signed by an officer of the institution and include account title, type of account (checking, savings, other), account number, institution's ABA routing/transit number, and your taxpayer identification number.

2. Automated Funding Service (AFS) cont'd

YOUR NAME AND ADDRESS	123
	12 - 34 567
PAY TO THE ORDER OF _____	\$ _____
_____	DOLLARS
SAMPLE VOID	
BANK NAME AND ADDRESS	
MEMO _____	
:123456789: 345678: 1011	

TAPE
PRE-PRINTED
VOIDED
CHECK HERE

3. Funding Frequency and Amount

- Monthly (\$25 minimum - 12 contributions per year) Semiannually (\$150 minimum - 2 contributions per year)
 Quarterly (\$75 minimum - 4 contributions per year) Annually (\$300 minimum - 1 contribution per year)

Dollar amount of contributions: \$ _____ Begin contributions effective (month/day/year): _____

You may not use the Automated Funding Service to make rollover contributions. Automated funding will be rejected if the contribution will cause the account balance to exceed NextGen 529's maximum contribution amount.

4. AFS Agreement and Signature

By signing this Merrill Automated Funding Service Enrollment/Change Authorization Form, you hereby authorize Merrill to debit the account indicated in the dollar amount and frequency specified and to contribute such funds to the NextGen 529 Account designated.

You authorize the financial institution holding the account to be debited to accept Automated Clearing House debits to your account without responsibility for the correctness thereof. You further agree that Merrill will not be liable for any loss, liability, cost or expense for acting upon your written instructions, except to the extent required by applicable law.

This authorization will remain in full force and effect until Merrill has received notification from you of its change or termination. Either you or Merrill may terminate this authorization at any time. Any termination will become effective as soon as Merrill has had a reasonable amount of time to act on it. If you notify Merrill verbally, Merrill may require that you also send written notification.

If I am an individual or entity, other than the Participant, authorizing the automated funding, I acknowledge that I will have no subsequent control over the contributions and that only the Participant may direct transfers, rollovers, investment changes (as permitted under federal law), withdrawals and changes to the Designated Beneficiary.

X _____
Participant Signature (required)

_____ Date

X _____
Contributor Signature (required if contributions are made by a person/entity other than the Participant)

_____ Date

PLEASE FOLLOW THESE MAILING INSTRUCTIONS TO AVOID DELAYS IN PROCESSING

For clients serviced by:

Merrill Advisor

Return to: Address specified on your NextGen 529 Account statement, or contact the Merrill office servicing your accounts.

Non-Merrill Advisors

Return to: College Plan Services
P.O. Box 1518
Pennington, NJ 08534-1518

You can also fax this form to 609.910.4696.

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Program Administrator

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