



Trusted Contact Form

Copper Leaf Financial will contact this individual if there are questions or concerns about your health or welfare due to potential diminished capacity, financial exploitation, or abuse, endangerment and/or neglect.

We will:

- Provide the trusted contact with information about you and/or your account(s), but not:
 - o The ability to transact on your account(s).
 - o Inquire about your current contact information or health status.
 - o Inquire about whether another person or entity has legal authority to act on your behalf (e.g., legal guardian or conservator, or trustee).

Trusted Contact Name: _____

Relationship to Client: _____

Phone: _____

Email: _____

Address: _____