



# Power of Attorney Authorization Form

Use this form to grant authority as power of attorney on your account to a person. The Attorney-in-Fact is granted authority to buy, sell, and assign securities in your Invesco account(s).

**Note:** For Invesco 403(b), SIMPLE IRA, SARSEP IRA and other employer sponsored plans, a new Invesco Power of Attorney Authorization Form must be submitted for each transaction request. The Attorney-In-Fact may not be added to these accounts.

**This is an important legal document. Consult with an attorney if there is anything about this form that you do not understand. Before executing this form, please read the important information below:**

- This authorization form grants broad powers over your Invesco account(s) to the person designated as your Attorney-in-Fact; which powers may be exercised without additional approval from you.
- The rights and powers over your Invesco account(s) granted hereunder to an Attorney-in-Fact shall be “durable” rights and powers; which rights are not affected by your incapacity or disability or by lapse of time.
- You and the Attorney-in-Fact each have the right to revoke or terminate this Power of Attorney at any time by providing written notice to Invesco Investment Services, Inc. (IIS).
- The Attorney-in-Fact must be a U.S. Citizen.
- For an Invesco IRA (including Traditional, Roth, and SEP), Transfer on Death (TOD), Individual, or Joint account, the completion of this form will allow permanent addition of the Attorney-in-Fact to the account registration.
- For an Attorney-in-Fact to be named on a joint account, the joint owner(s) must sign this form.
- Account owner and Attorney-in-Fact signatures must be notarized.

**IMPORTANT:** Federal law mandates that all financial institutions obtain, verify, and record information identifying each person(s) who maintains an account for another individual(s) who lacks legal capacity. Please verify the following information is accurate for the designated Attorney-in-Fact: name, Social Security number, date of birth and physical residential address. If you fail to provide the requested information and/or any of the information cannot be confirmed, IIS reserves the right to not honor instructions received from the Attorney-in-Fact.

All information provided is kept confidential as detailed in the Invesco Privacy Policy located at the end of this form.

*\*Required*

PLEASE USE BLUE OR BLACK INK

PLEASE PRINT CLEARLY IN BLOCK CAPITAL LETTERS

## 1 | Invesco Account Number and Registration Information

Social Security Number\*

Invesco Account Number *(List all applicable.)*

Name of Account Owner *(Please print name(s) as it appears on account.)*

Name of Joint Account Owner *(If applicable)*

Email Address

## 2 | Contact Preference

In some cases, Invesco will attempt to contact you for more information or to resolve any discrepancies that may be present with your request. The preferred method you provide below will be used for this request only and will not be added to your account for future contact.

Please provide your preferred method of contact *(Select one.)*

Please contact my financial professional on record.

Please contact me at  -  -

PLEASE USE BLUE OR BLACK INK

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**3 | Grantor**

**Important Note:** The Attorney-in-Fact has legal authority to act on behalf of another living individual, known as the grantor. The grantor must be one of the Invesco account owners. (If Power of Attorney is being granted for more than one account owner, a separate form is required from each.)

Full Name of Grantor\*

**4 | Attorney-in-Fact Information (Required)**

Full Name of Attorney-in-Fact for Grantor named in Section 3\*

Social Security Number\*

Date of Birth\* (mm/dd/yyyy)

Mailing Address\* (Including apartment or P.O. Box number.)

City\*

State\*

ZIP\*

Primary Phone Number

Email Address

Residential Address (Required if different than mailing address or if a P.O. Box address was given above.)

City

State

ZIP

I request duplicate statements sent directly to my Attorney-in-Fact at the above mailing address.

**5 | Governing Law (Please read.)**

The laws of the state of Delaware shall apply and bind the parties in any and all questions arising under this Power of Attorney agreement, including questions of validity, interpretation and performance.

**6 | Terms and Conditions (Please read.)**

**Authority you grant your Attorney-in-Fact:**

The designated Attorney-in-Fact may inquire about, purchase and exchange mutual funds within your Invesco account(s) in the same manner and to the same extent that you are permitted to do so. In addition, the designated Attorney-in-Fact may withdraw assets from your Invesco account(s) regardless of the tax consequences of such distribution, and make changes to the dividend and capital gain distribution options. All distributions will be made payable to you as the account owner(s). The designated Attorney-in-Fact is not authorized to draw checks (Check Writing Option) upon your Invesco account(s). To the extent permitted by applicable taxing authority and law, the designated Attorney-in-Fact is also authorized to make and exercise any tax elections available to you under federal, state, or local tax law related to any of the Invesco accounts set forth on this form. With respect to IRAs, including Traditional IRAs, Roth IRAs, and SEP IRAs, the designated Attorney-in-Fact may initiate rollovers, Roth IRA conversions, IRA recharacterizations, and other transfers of assets between and among your account(s).

**Role of Invesco – Disclaimer:**

Invesco is not acting as a fiduciary pursuant to this Power of Attorney Authorization Form. You, as the account owner(s), is responsible for investigating and selecting the Attorney-in-Fact designated herein. Invesco has not and will not approve, recommend or endorse any Attorney-in-Fact selected by account owner(s). Invesco will only effect instructions it receives from an Attorney-in-Fact. The account owner(s) and Attorney-in-Fact are solely responsible for determining the suitability for the account owner(s) of any investment strategy or transaction. Invesco assumes no responsibility whatsoever for reviewing or monitoring any investment decision or activity of the Attorney-in-Fact. Invesco will not provide legal, trading or tax advice.

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**Termination:**

The account owner(s) and/or Attorney-in-Fact agree to notify Invesco immediately, in writing, if the account owner(s) desires to revoke the authority given to the Attorney-in-Fact under this authorization form. The Attorney-in-Fact agrees to notify Invesco immediately, in writing, upon the account owner's death. This Power of Attorney shall remain in effect until Invesco receives written notice of its termination and has had sufficient time to process such notice and terminate the authority of the Attorney-in-Fact. The Power of Attorney shall automatically be deemed revoked upon receipt of a new or subsequent Power of Attorney Authorization Form. Invesco reserves the right, in its sole discretion, to no longer honor instructions from the Attorney-in-Fact designated herein and will promptly notify the account owner(s) if it chooses to do so.

**Indemnification of Invesco by Account Owner(s) including joint owner(s) if applicable:**

The account owner(s) agrees to indemnify and hold harmless Invesco, its affiliates, each of their respective employees, officers, trustees, or directors, and each of the Invesco funds from and against any and all claims, losses, liabilities, damages, and expenses, including attorney fees, that may be incurred by their reliance on this Power of Attorney or their execution of the Attorney-in-Fact's instructions. The account owner(s) agrees that because Invesco will not supervise or monitor the Attorney-in-Fact's trading decisions or other activities with respect to the account(s) designated in this form, the account owner(s) will not attempt to hold Invesco liable for any trade, withdrawal or decision made by the Attorney-in-Fact whom the grantor has selected, regardless of whether or not such trade, withdrawal or decision was specifically authorized by the account owner(s). The account owner(s) hereby ratifies and confirms any and all transactions, trades, withdrawals or other dealings effected in and for the account owner(s) by the Attorney-in-Fact designated herein. Invesco's rights under this paragraph are in addition to any other rights it has under other agreements with the account owner(s) and/or Attorney-in-Fact.

**Indemnification of Invesco by Attorney-in-Fact:**

The Attorney-in-Fact agrees to indemnify and hold harmless Invesco, its affiliates, each of their respective employees, officers, trustees, or directors, and each of the Invesco funds from and against any and all claims, losses, liabilities, damages, and expenses, including attorney fees, that may arise out of, or relating to, any breach incurred by the Attorney-in-Fact of any provision of this agreement or other agreements with Invesco and/or the account owner(s); the performance or non-performance of the Attorney-in-Fact's services; and any trade, withdrawal, redemption or tax issue or action of the Attorney-in-Fact in the account(s); and any disputes involving the Attorney-in-Fact and the account owner(s). Invesco's rights under this paragraph are in addition to any other rights it has under other agreements with the account owner(s) and/or Attorney-in-Fact.

**7 | Authorization and Signatures (Please sign and date below.)**

**REQUEST FOR TAXPAYER IDENTIFICATION NUMBER (Substitute Form W-9)**

Under penalties of perjury, I certify that:

- 1. The number shown on this form is my correct taxpayer identification number, **and**
- 2. I am not subject to backup withholding because: **(a)** I am exempt from backup withholding, or **(b)** I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or **(c)** the IRS has notified me that I am no longer subject to backup withholding, **and**
- 3. I am a U.S. person (including a U.S. resident alien), **and**
- 4. The requirement to provide FATCA exemption codes does not apply.

**Certification Instructions:** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN.

By signing below, I acknowledge that I have read and agree to be bound by all of the terms and conditions of this Power of Attorney Authorization Form.

**Signature of Grantor\***

Date (mm/dd/yyyy)

**X**

/  /

PLEASE USE BLUE OR BLACK INK

PLEASE PRINT CLEARLY IN BLOCK CAPITAL LETTERS

**Certification of Acknowledgment of Notary Public (for Grantor):**

State of \_\_\_\_\_, in the County of \_\_\_\_\_ Subscribed and sworn before me by the above-named individual who is personally known to me or who has produced (type of identification) \_\_\_\_\_ as identification, that the foregoing statements were true and accurate and made of his/her own free act and deed, on (Date – mm/dd/yyyy) \_\_\_\_\_ .

Notary Public

My Commission Expires: \_\_\_\_\_

Date (mm/dd/yyyy) \_\_\_\_\_

Notary Seal

**Signature of Joint Account Owner (If applicable.)**

By signing below, I acknowledge that the Attorney-in-Fact will possess the same account rights as the joint owner, including authorizing transactions by telephone and/or web.

Date (mm/dd/yyyy)

X \_\_\_\_\_

□□ / □□ / □□□□

**Certification of Acknowledgment of Notary Public (for Joint Account Owner):**

State of \_\_\_\_\_, in the County of \_\_\_\_\_ Subscribed and sworn before me by the above-named Joint Account Owner who is personally known to me or who has produced (type of identification) \_\_\_\_\_ as identification, that the foregoing statements were true and accurate and made of his/her own free act and deed, on (Date – mm/dd/yyyy) \_\_\_\_\_ .

Notary Public

My Commission Expires: \_\_\_\_\_

Date (mm/dd/yyyy) \_\_\_\_\_

Notary Seal

**Signature of Attorney-in-Fact\***

By signing below, I understand and acknowledge that IIS will treat all directions, orders, requests and other activity coming from me as if such orders, requests, and other activity had come directly from the account owner(s) and I represent that I have read and agree to be bound by all of the terms and conditions of this Power of Attorney Authorization Form.

Date (mm/dd/yyyy)

X \_\_\_\_\_

□□ / □□ / □□□□

**Certification of Acknowledgment of Notary Public (for Attorney-in-Fact):**

State of \_\_\_\_\_, in the County of \_\_\_\_\_ Subscribed and sworn before me by the above-named Attorney-in-Fact who is personally known to me or who has produced (type of identification) \_\_\_\_\_ as identification, that the foregoing statements were true and accurate and made of his/her own free act and deed, on (Date – mm/dd/yyyy) \_\_\_\_\_ .

Notary Public

My Commission Expires: \_\_\_\_\_

Date (mm/dd/yyyy) \_\_\_\_\_

Notary Seal

**8 | Mailing Instructions**

Please send completed and signed form to:

**(Direct Mail)**

Invesco Investment Services, Inc.  
P.O. Box 219078  
Kansas City, MO 64121-9078

**(Overnight Mail)**

Invesco Investment Services, Inc.  
c/o DST Systems, Inc.  
430 W. 7th Street  
Kansas City, MO 64105-1407

**For additional assistance please contact an Invesco Client Services representative at 800 959 4246, weekdays, 7 a.m. to 6 p.m. Central Time.**

**Visit our website at [invesco.com/us](http://invesco.com/us) to:**

- Check your account balance
- Confirm transaction history
- View account statements and tax forms
- Sign up for eDelivery of statements, daily transaction statements, tax forms, prospectuses, and reports
- Check the current fund price, yield and total return on any fund
- Process transactions
- Retrieve account forms and investor education materials

**Call the 24-Hour Automated Investor Line 800 246 5463 to:**

- Obtain fund prices
- Confirm your last three transactions
- Order a recent account statement(s)
- Check your account balance
- Process transactions

To use the system, please have your account numbers and Social Security number available.

## FACTS

### WHAT DOES INVESCO DO WITH YOUR PERSONAL INFORMATION? \*

#### Why?

Financial companies choose how they share your personal information. Federal law gives consumers the right to limit some but not all sharing. Federal law also requires us to tell you how we collect, share, and protect your personal information. Please read this notice carefully to understand what we do.

#### What?

The types of personal information we collect and share depend on the product or service you have with us. This information can include:

- Social Security number and income
- Transaction history and investment experience
- Investment experience and assets

When you are *no longer* our customer, we continue to share information about you according to our policies.

#### How?

All financial companies need to share customers' personal information to run their everyday business. In the section below, we list the reasons financial companies can share their customers' personal information; the reasons Invesco chooses to share; and whether you can limit this sharing.

Reasons we can share your personal information	Does Invesco share?	Can you limit this sharing?
<b>For our everyday business purposes</b> —such as to process your transactions, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus	Yes	No
<b>For our marketing purposes</b> — to offer our products and services to you	No	We do not share
<b>For joint marketing with other financial companies</b>	No	We do not share
<b>For our affiliates' everyday business purposes</b> — information about your transactions and experiences	No	We do not share
<b>For our affiliates' everyday business purposes</b> — information about your credit worthiness	No	We do not share
<b>For our affiliates to market to you</b>	No	We do not share
<b>For non-affiliates to market to you</b>	No	We do not share

#### Questions?

Call 1-800-959-4246 (toll free).

\* This privacy notice applies to individuals who obtain or have obtained a financial product or service from the Invesco family of companies. For a complete list of Invesco entities, please see the section titled "Who is providing this notice" on page 2.

## Who we are

### Who is providing this notice?

Invesco Advisers, Inc., Invesco Private Capital, Inc., Invesco Senior Secured Management, Inc., WL Ross & Co. LLC, Invesco Distributors, Inc., Invesco Managed Accounts, LLC, and the Invesco family of mutual funds.

## What we do

### How does Invesco protect my personal information?

To protect your personal information from unauthorized access and use, we use security measures that comply with federal law. These measures include computer safeguards and secured files and buildings.

### How does Invesco collect my personal information?

We collect your personal information, for example, when you

- Open an account or give us your contact information
- Make deposits or withdrawals from your account or give us your income information
- Make a wire transfer

We also collect your personal information from others, such as credit bureaus, affiliates or other companies.

### Why can't I limit all sharing?

Federal law gives you the right to limit only

- Sharing for affiliates' everyday business purposes—information about your creditworthiness
- Affiliates from using your information to market to you
- Sharing for nonaffiliates to market to you

## Definitions

### Affiliates

Companies related by common ownership or control. They can be financial and nonfinancial companies.

*Invesco does not share with our affiliates so that they can market to you.*

### Nonaffiliates

Companies not related by common ownership or control. They can be financial and nonfinancial companies.

*Invesco does not share with non-affiliates so that they can market to you.*

### Joint marketing

A formal agreement between nonaffiliated financial companies that together market financial products or services to you.

*Invesco doesn't jointly market.*