



Questions? Call 1-800-731-7150

# TRUSTEE VERIFICATION

## SCHEDULE B

**Instructions:** This document should be completed in addition to a *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, please fax or mail this document to your MAGIC representative at the fax number or address listed at the bottom of this page.

MAGIC ACCOUNT #: \_\_\_\_\_  
(Fund Use Only)

**SCHEDULE B DETAIL:** (Please read, complete, sign and date this section.)

A trusteed account should be opened in MAGIC. The undersigned hereby acknowledge:

1. The account is for the benefit of the following Investor: \_\_\_\_\_  
(MAGIC 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. Based on our review of the trust document, we have determined or confirmed that:
  - a. The fiduciary, trustee, or fiscal agent which has been appointed under the trust document is: \_\_\_\_\_  
(Fiduciary, Trustee or Fiscal Agent)
  - b. MAGIC is an authorized investment under the trust document, and the trustee is authorized to open the account in the Fund and to invest in the Fund.
4. The account will be opened and held in the name of the trustee for the benefit of the Investor, and the trustee will be authorized, among other things, to give the Fund direction with respect to opening and closing the account, requesting changes to account information and initiating the purchase and redemption of MAGIC shares.

Investor Authorized Signatory	Title	Signature	Date
Trustee, Fiduciary, or Fiscal Agent	Title	Signature	Date

**FUND USE ONLY:** (Please fax or mail this document to your MAGIC representative for their signature below.)

MAGIC Representative	Title	Signature	Date
----------------------	-------	-----------	------

**REQUIRED DOCUMENTATION:** (Please include the following documents with this Schedule B.)

- New Investor Application  
(ONLY FOR NEW INVESTORS)
- Trusteed Account Application
- Trust Document (A copy of the first page)
- Contact Record (New Contacts Only)
- Permissions

<b>Any document received by email will not be accepted. Please send by fax or mail.</b>	
<b>FAX TO:</b> MAGIC Client Services Group 1-888-535-0120	<b>MAIL TO:</b> MAGIC Client Services Group P.O. Box 11760 Harrisburg, PA 17108-1760