

SPOUSAL CONSENT

TO ACCOUNT HOLDER'S BENEFICIARY DESIGNATION



1. NDTCO ACCOUNT INFORMATION

Account Holder Name:	New Direction Account Number:
----------------------	-------------------------------

2. SPOUSAL CONSENT (REQUIRED ONLY IF YOUR SPOUSE IS NOT YOUR PRIMARY BENEFICIARY)

*The consent of spouse must be signed only if all the following conditions are present; (1) the account holder's spouse is living, (2) the account holder's spouse is not the sole Primary Beneficiary named to the account and (3) the account holder and spouse are residents of a community property state (AZ, CA, ID, LA, NM, NV, TX, WA or WI).

I certify that I am the spouse of the account holder listed above. I hereby certify that I have reviewed the Designation of Beneficiary Form and I understand that I have a property interest in the account. I hereby acknowledge and consent to the above designation of beneficiary other than, or in addition to, myself as primary beneficiary. I further acknowledge that I am waiving part or all my rights to receive benefits under this plan when my spouse dies. By signing below, I hereby consent to the above beneficiary designation.

3. SIGNATURE

Spouse Printed Name:	Spouse Signature:	Date:
----------------------	-------------------	-------

Example

SPOUSAL CONSENT

TO ACCOUNT HOLDER'S BENEFICIARY DESIGNATION



New Direction
TRUST COMPANY
1070 W. Century Drive
Louisville, CO 80027
P: 877-742-1270 | F: 303-665-5962

Example