ADVISOR BANK

TheBancorp™

REQUEST TO ADD, REMOVE OR CHANGE THIRD-PARTY STATEMENT RECIPIENT

I request that The Bancorp Bank, N.A. (Bank) update my account(s) listed below to reflect the following changes with regard to the third-party recipient (e.g. Financial Professional, CPA, Attorney, etc.) of my account statement(s). Changes with regard to the third-party statement recipient must be signed by the authorized signer for each account listed.

Please complete the entire form (Parts 1-3). Please keep a copy of this form for your records.

PART 1: Account Information

Account Number	Account Title
Account Number	Account Title
Account Number	Account Title

Note: Unless otherwise noted on this form, changes listed in Part 2 will be made to all accounts listed in Part 1.

PART 2: Third-Party Statement Recipient (e.g., Financial Professional, CPA, Attorney, etc.)

◯ Add

Name	Firm		
Address	City	State	ZIP Code

◯ Remove

Name	Firm		
Address	City	State	ZIP Code

◯ Change Firm Name or Address

Name	Firm		
Address	City	State	ZIP Code

Banking services provided by:
The Bancorp Bank, N.A. Member FDIC.
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PART 3: Signature — Required

The individual signing below must be an Authorized Signer on each of the accounts listed in Part 1.

Signature of Authorized Signer	Date (mm/dd/yyyy)

Authorized Signer Name

Email	Phone

Allow one full statement cycle for the change to take effect.

Please **mail or fax** this completed form to:

Advisor Bank Attn: Account Maintenance
409 Silverside Road, Suite 105, Wilmington, DE 19809

Fax: 302.791.5680

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