



**TIAA-CREF INVESTMENT ADVISOR
FEE BILLING AUTHORIZATION AGREEMENT**
(For Defined Contribution Plans Only)

This Agreement serves as an ongoing directive to Teachers Insurance and Annuity Association and the College Retirement Equities Fund ("TIAA-CREF") to pay investment advisor fees directly to an investment advisor or firm selected by the Participant, hereafter referred to as the Client. These fees will be paid on behalf of the Client from the Client's defined contribution plan retirement account(s) pursuant to an agreement between the Client and the Client's investment advisor.

While this *Fee Billing Authorization Agreement* is in effect, only advisory fees that are directly related to the Client's defined contribution plan retirement account(s) may be paid from accumulations in those account(s), and such fees may not be paid from any other sources. Note, fee calculations will be based on the total accumulation within the contract(s). However, actual deductions can only be made from permissible funds/accounts within the contract.

This agreement is to be completed and signed by the Client, the Client's investment advisor and the Plan Sponsor's authorized representative (if required by the institution). ***TIAA-CREF and the Plan Sponsor shall have no responsibility for verifying the accuracy of the investment advisor's fee or whether the investment advisor's advice was suitable.*** The resolution of any fee errors resulting in overpayments to the investment advisor or other billing disputes will be the sole responsibility of the Client and his/her investment advisor.

Neither TIAA-CREF, nor the Plan Sponsor, shall be liable for any claims, damages, taxes, penalties, or losses resulting from the investment advice the Client may receive from his /her investment advisor or from the payment of investment advisor fees from a client's retirement savings accumulations.

1. Client Information
Name: _____ Address: _____ _____ Social Security Number: _____

2. Contract(s) Authorized		
TIAA Contract Number	Type	Institution Name

3. Authorized Investment Advisor Information	
Firm or Investment Advisor Name* <u>Lorence & Vander Zwart</u> <small>*Firm or Investment Advisor Name should match registration on file with TIAA-CREF.</small>	
APIN* <u>N810773</u>	Contact Name <u>Ryan J. Vander Zwart</u>
<small>*If you do not know your APIN, please contact TIAA-CREF's Advisor Services at 888-842-0318, option 1.</small>	
Phone Number <u>616-394-4994</u>	Email Address <u>rvanderzwart@lvzadvisors.com</u>

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4. Client Authorization

I hereby authorize TIAA-CREF to pay investment advisor fees directly to the investment advisor or firm listed on this form. I acknowledge that I will receive a confirmation after each fee payment. In addition, all fee payments will be reflected on my quarterly statements.

I understand that I should seek tax advice from an appropriate tax advisor if I am not sure of the implications of deducting fees from my defined contribution plan retirement account(s).

I will be solely responsible for monitoring the reasonableness and accuracy of the third party fee. It is the advisor's responsibility to ensure that there are sufficient assets in the permissible account(s) for the contract(s) listed above to cover his/her invoices. If there are insufficient assets in my account(s), TIAA-CREF will be unable to pay the fee.

I understand that I must resolve any fee errors or other billing problems, and neither the Plan Sponsor nor TIAA-CREF shall have any responsibility for resolving such problems.

This Agreement will remain in effect until it is terminated in writing by either my investment advisor or me.

Client Signature

Date

Print Name

5. Investment Advisor Authorization

I understand that this agreement, in conjunction with the *Authorization To Access TIAA-CREF Accounts* form, authorizes TIAA-CREF to pay my fees, which have been agreed to by the investment advisory services I have provided to my Client's defined contribution plan retirement account(s). I will submit all invoices through TIAA-CREF's Advisor Services website. I will receive a confirmation of the fee detail via mail. All payments will be mailed to the address of record or sent to my bank by EFT, if banking instructions are on file.

I understand that each Client's tax situation is different and I should seek tax advice from an appropriate tax advisor if I am not sure of the implications of deducting fees from a defined contribution plan retirement account(s).

I acknowledge and agree that this *Fee Billing Authorization Agreement* must be signed by both the Client and the Plan Sponsor's representative (if required by the institution) before it can take effect.

I acknowledge and agree that the Client is solely liable for the cost of services that I provide to him/her, and that it is my responsibility to ensure that there are sufficient assets in the Client's permissible account(s) to cover my fees for advisory services. I understand and agree that if there are insufficient assets in the Client's account(s), TIAA-CREF will be unable to pay the fee and I will resubmit the fee through TIAA-CREF's Advisor Services website when sufficient funds are available.

I acknowledge and agree that TIAA-CREF cannot be responsible for verifying the accuracy of my fees, and that neither the Plan Sponsor nor TIAA-CREF will be responsible in any way for the resolution of any fee errors or other billing disputes between the client and me.

I acknowledge that I am registered with the SEC or the appropriate State Securities Commission as a registered investment advisor or affiliated with a firm that is registered as such.

This Agreement will remain in effect until either the Client or I terminate it in writing.

Investment Advisor Signature*

Date

Lorence & Vander Zwart

Print Name

*Authorized Investment Advisor from Page 1 (Firm representative if authorized entity is a firm)

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Client Name (from Page 1): _____

Investment Advisor Name (from Page 1): Lorence & Vander Zwart

6. Plan Sponsor Authorization (if required)*

I, as the Plan Sponsor's representative, hereby authorize TIAA-CREF to pay investment advisor fees to the investment advisor or firm from the Client's retirement account(s).

I understand that it is the investment advisor's responsibility to ensure that there are sufficient assets in the Client's approved account(s) to cover his/her invoices. If there are insufficient assets in the Client's permissible account(s), TIAA-CREF will be unable to pay the fee and the fee will have to be resubmitted by the investment advisor when sufficient funds are available.

I understand that the Plan shall have no liability for the payment of the investment advisor's fees other than to authorize TIAA-CREF to pay fees from the Client's retirement account(s).

I understand that the Plan, the Plan Sponsor, and TIAA-CREF shall not be responsible in any way for resolving invoicing errors or other billing disputes between the Client and his/her investment advisor.

Plan Sponsor Authorized Representative Signature

Date

Print Name

Title

Plan Sponsor

* Only select Plan Sponsors require a Plan Sponsor signature with each individual fee billing agreement. If you are unsure if this Plan Sponsor requires its signature with this agreement, please contact the Plan Sponsor or TIAA-CREF's Advisor Services.

If TIAA-CREF receives this page unsigned and the Plan Sponsor requires a signature, TIAA-CREF will forward this agreement to the Plan Sponsor for signature. However, this may result in delays in processing the agreement.

Please contact TIAA-CREF's Advisor Services at 888-842-0318, option 1, 8 a.m. - 7 p.m. ET with any questions.