## AUTHORIZATION TO ISSUE 1st 60-DAY CONTRIBUTION TAX RECEIPT

Date:		
То:		
	(Fund Company or Intermediary)	<del></del>
Account Holder Name:		
Account Number:		
Attention: Client Services D	Department - Processing	
	t the business is to be included as a first sixty-da was transacted prior to midnight, March 1, 2023 ed prior to the deadline.	•
Please accept this as your of contribution tax receipt.	good and sufficient authority to issue a first sixty	-day
Attached you will find docur	mentation for the above noted client.	
GP Wealth Management Co	corporation assumes full responsibility and releas	ses:
	(Fund Company or Intermediary)	
Yours truly,		
Financial Advisor Name (p	orint)	
Dealer/Financial Advisor N	Number	
Financial Advisor Signatur	re	

