

PMA GPS® ACCESS REQUEST FORM

Please complete this form for EACH user. Upon verification of the information provided and authorization by PMA Financial Network Inc., a UserID will be e-mailed to the user at the e-mail address provided below. Instructions will be provided on how to activate the account.

* Current GPS users will maintain their current UserID and password

- Check here if you are a current GPS user and want WISC access.
- Check here if this is a new GPS account.

Entity Name: _____

User Information:

First Name: _____ Last Name: _____

Title/Position: _____

Phone Number: _____

E-Mail Address (Mandatory): _____

Access Specification

- User may access all accounts/sub-accounts for the Entity.
- User may only access the following accounts/sub-accounts:

Access Type (if this section is blank, the User will be granted access to all on-line transactions)

- All on-line transactions (FULL ACCESS)
- View Only Access -- No on-line transactions (LIMITED ACCESS)
- User may access **Purchase** options only
- User may access **Redemption** options only

Email Delivery:

- Email Daily Confirmations and Monthly Statements, instead of via U.S. Postal mail

User Permission Authorized By:

This section must be signed by either an authorized person as designated in the New Account Application, a Primary Contact or Authorized Personnel Information form, OR the new incumbent in an authorized position, accompanied by a copy of the board minutes covering the appointment/election of a new incumbent.

Name: _____ Title: _____

Signature: _____ Date: _____ Phone: _____

Send completed forms to your PMA representative or to gps@pmanetwork.com