

APPOINTED REPRESENTATIVES

Instructions

- To authorize an Attorney-in-Fact, Guardian, or Conservator to act on an IncomeDriver Note™ owner's behalf in regard to an IncomeDriver Note™, please complete this form and provide documentation supporting the right of the named appointed representative to act on behalf of the relevant IncomeDriver Note™ owner.
- The court provided documentation must be witnessed and notarized and the notary and witness CANNOT be the same person.
- To appoint an Attorney-in-Fact, a copy of the appointing Power of Attorney that is drafted and executed in accordance with relevant state or federal laws governing the Power of Attorney must be submitted with this form.
- A Power of Attorney must be in writing, must indicate that it includes managing the IncomeDriver Note™ owner's financial affairs
 and accounts, the name of the person executing the Power of Attorney must be the same as the name of the IncomeDriver
 Note™ owner's and must be notarized.
- Once this form is processed and it is determined, in Toyota Financial Services sole discretion, that the named appointed representative is properly authorized, the Attorney-in-Fact, Guardian, or Conservator will be added to the IncomeDriver Note™ to act on behalf of the relevant IncomeDriver Note™ owner.
- Neither the Processing Agent nor Toyota Financial Services shall have any liability to the IncomeDriver Note™ owner or Attorneys-in-Fact for the IncomeDriver Note™ in question, for complying with any request of an Attorney-in-Fact. Upon the Processing Agent's receipt of notification of the death of the IncomeDriver Note™ owner, the Process Agent will no longer accept any instructions from the Attorney-in-Fact.
- An Attorney-in-Fact, Guardian or Conservator who completes this form must also **provide a valid and non-expired copy of one of** the following: U.S. Driver's License, U.S. State ID, Passport, or Passport Card.
- · Please sign carefully in blue or black ink only and mail this form and your supporting document to:

Toyota Financial Services IncomeDriver Notes™ PO Box 534050 Pittsburgh, PA 15253-4050

- If an owner is submitting this form to appoint an Attorney-in –Fact on the identified IncomeDriver Note™, the appointing owner must sign this form. If the appointed representative is submitting this form on behalf of the represented IncomeDriver Note™ owner, the appointed representative must sign this form.
- For assistance, please contact the Service Center at 844-4673, Monday-Friday, from 8am-7pm ET.

I am establishing a Conservator for the IncomeDriver Note™ listed above

To help the government fight the funding of terrorism and money laundering activities, Federal Law requires all financial institutions to obtain, verify and record information that identifies each person who opens an account. To verify your identity, we require information on each registered owner/co-owner of the investment. As part of normal verification procedures, a credit bureau inquiry will be conducted.

| Provide Information on the Current IncomeDriver Note™ | | | | | |
|---|----------------------|----------------------|-------------------|--|--|
| IncomeDriver Note™ Number | Primary Owner's Name | Last 3 Digits of SSN | | | |
| Joint Owner's or Co-Trustee's Name (if applicable) | | Last 3 Digits of SSI | N (if applicable) | | |
| Registered Street Address | City | State | Zip Code | | |
| | | | | | |
| 2. Indicate whether you are establishing a POA, Conservator or Guardian for the IncomeDriver Note ™ | | | | | |
| □ I am establishing a Power of Attorney for the IncomeDriver Note™ listed above | | | | | |
| □ I am establishing a Guardian for the IncomeDriver Note™ listed above | | | | | |



IncomeDriver Notes™

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| 3. Provide Personal Information for AIF, Guardian, or Conservator (All Information is Required Unless Indicated) | | | | | |
|--|---------------|----------------------------|---|--|--|
| First Name, Middle Initial, Last Name | | | | | |
| | | | | | |
| Social Security Number | | Date of Birth (MM/DD/YYYY) | | | |
| | , | | | | |
| Driver's License Number of State ID if Driver's License Unavailable | Issuing State | Primary Telephone Number | Secondary Telephone Number (Not Required) | | |
| | | | | | |
| Home Address (Street Address, City, State and Zip Code) CANNOT BE A FOREIGN ADDRESS OR A P.O. BOX | | | | | |
| | | | | | |
| Previous Address if Less than 2 Years at Home Address (Street Address, City, State and Zip Code) | | | | | |
| | | | | | |
| Signature 1 | | | Date | | |
| | | | | | |
| Signature 2 | | | Date | | |
| | | | | | |

Please ensure that an acceptable form of identification and supporting documents are included.

Mail to: Toyota Financial Services IncomeDriver Notes™, PO Box 534050, Pittsburgh, PA 15253-4050

INCOMEDRIVER NOTES™ DO NOT CONSTITUTE AN INVESTMENT OF ANY TYPE WITH THE PROCESSING AGENT. REFERENCE IS HEREBY MADE TO THE PROSPECTUS FOR A FULL DESCRIPTION OF THE PROCESSING AGENT'S DUTIES AND FOR COMPLETE INFORMATION CONCERNING THE NOTES. SUCH PROSPECTUS SHALL PREVAIL OVER THIS FORM TO THE EXTENT OF ANY CONFLICT OR INCONSISTENCY.