

Important information about this form:

- Fill out this form to verify the relationship between an adult Beneficiary (who is over the age of 19) and the Authorized Legal Representative of the Alabama ABLER account.
- Please include a copy of one of the following: Power of Attorney or Legal Guardianship documentation.
- Once your relationship to the Beneficiary is verified, you can start using the ABLER account.
- Type or print clearly in black ink, and do not staple the pages.

Need help?

Give us a call Monday – Friday from 8am – 7pm CT at 1-833-711-2253

Individuals with speech or hearing disabilities may dial 711 to access Telecommunications Relay Service (TRS) from a telephone or TTY.

Mail the form to:

Alabama ABLER
P.O. Box 534419
Pittsburgh, PA 15253- 4419

Overnight Mail:

Alabama ABLER
Attention: 534419
500 Ross Street, 154-0520
Pittsburgh, PA 15262

Fax:

833-286-8313

1 ABLER account information

Name of the Beneficiary on the ABLER account (First and last)

____ - ____ - ____ - ____ - ____
Beneficiary’s Social Security or Taxpayer Identification Number

Alabama ABLER account number

2 Verify the relationship

You need to provide documentation for verification to establish the relationship between the adult Beneficiary and the Authorized Legal Representative of the ALE account. The document should reflect the decision that allows you to make financial decisions in the best interest of the Beneficiary as their Authorized Legal Representative.

Please include copies of all the pages of the document you submit. The documentation will not be returned.

What's your relationship to the beneficiary? (Please select one)

Power of Attorney

I have the Power of Attorney to open and manage an ALE account for the Beneficiary.

Provide a copy of the following:

- Signed durable Power of Attorney

Legal Guardian

The Beneficiary does not have a Power of Attorney pertaining to this ALE account, and I am their legal guardian.

Provide a copy of one of the following:

- Court Order
- Guardianship Order
- Letter of Guardianship

Conservator

The Beneficiary does not have a Power of Attorney pertaining to this ALE account, and I have been appointed conservator.

Provide a copy of one of the following:

- Letter of Conservatorship
- Conservatorship Order

3 Sign the form

The employee must be the DreamAhead Account Owner or if the account is an UGMA/UTMA, the Custodian for the minor. You cannot contribute payroll deductions into an account owned by your spouse, or by anyone else.

Signature of Account Owner/Custodian

___ / ___ / ___
Date (mm/dd/yyyy)