

Account Number _____

Rep ID _____ Alternate Branch _____

**FULL TRADING AUTHORIZATION WITH PRIVILEGE TO
WITHDRAW MONEY AND/OR SECURITIES**

CLIENT INFORMATION

Name and Address

CLIENT AUTHORIZATION

I, the undersigned, hereby authorize: _____
Authorized Agent Name

(whose signature appears below) as my agent and attorney ("Authorized Agent") to buy, sell, short, tender, exchange, convert, write, exercise or trade in stocks, bonds, option contracts (subject to acceptance and approval of an option agreement executed by the undersigned) and any other securities on margin (subject to execution of a margin agreement by the undersigned) or otherwise in accordance with your terms and conditions for my account and risk and in my name or account number on your books. I hereby agree to indemnify and hold you harmless from, and to pay you promptly on demand, any and all losses arising therefrom or debit balances due thereon.

In all such purchases, sales or trades you are authorized to follow the instructions of the aforesaid Authorized Agent in every respect concerning my account with you, and except as herein otherwise provided, he/she is authorized to act for me in the same manner and with the same force and effect as I might or could do with respect to such purchases, sales, trades, transfer of securities, and/or disbursements of funds as well as with respect to all other things necessary or incidental thereto **(except that he/she has not been granted endorsement power, nor the ability to register securities or make funds payable other than in the manner in which my account is registered).**

The undersigned hereby ratifies and confirms any and all transactions with you heretofore or hereafter made by the aforesaid Authorized Agent or for the undersigned's account.

This authorization and indemnity is in addition to (and in no way limits or restricts) any rights which you may have under any other agreement or agreements between the undersigned and your firm.

This authorization and indemnity is also a continuing one, shall not be affected by subsequent disability or incapacity of the undersigned, and shall remain in full force and effect until revoked by the undersigned by a written notice addressed to you and delivered to your office at:

Address of Branch

Account Number _____

Rep ID _____ Alternate Branch _____

**FULL TRADING AUTHORIZATION WITH PRIVILEGE TO
WITHDRAW MONEY AND/OR SECURITIES**

CLIENT AUTHORIZATION CONTINUED

But such revocation shall not affect any liability in any way resulting from transactions initiated prior to such revocation. In addition, if the account owner is an individual, this authorization shall terminate upon your receipt of notice of the death of the undersigned.

This authorization and indemnity shall inure to the benefit of your present firm and of any successor firm or firms irrespective of any change or changes at any time in the personnel thereof for any cause whatsoever, and of the assigns of your present firm or any successor firm.

If any provision of this authorization and indemnity shall be rendered invalid for any reason, the provisions in this agreement affected shall be deemed modified or superseded, as the case may be, and these provisions shall in all respects continue and be in full force and effect.

SIGNATURES

The undersigned acknowledges that he/she has read this form in its entirety before signing.

| | | | |
|---------------------------------|------|---------------------------------|------|
| Client Signature | Date | Authorized Agent Signature | Date |
| Print Name from Signature Above | | Print Name from Signature Above | |
| Notary Signature | Date | Notary Signature | Date |
| Seal Here | | Seal Here | |
| Accepted by: Firm Principal | | | Date |

FULL TRADING AUTHORIZATION WITH PRIVILEGE TO**WITHDRAW MONEY AND/OR SECURITIES**

The following information applies only to forms executed by individuals in the State of New York. Please note the following disclosure uses the term "Power of Attorney" to refer to the trading authority established with this document.

CAUTION TO THE PRINCIPAL

Your Power of Attorney is an important document. As the "principal," you give the person whom you choose (your "agent") authority to spend your money and sell or dispose of your property during your lifetime without telling you. You do not lose your authority to act even though you have given your agent similar authority.

When your agent exercises this authority, he or she must act according to any instructions you have provided or, where there are no specific instructions, in your best interest. "Important Information for the Agent" at the end of this document describes your agent's responsibilities.

Your agent can act on your behalf only after signing the Power of Attorney before a notary public. You can request information from your agent at any time. If you are revoking a prior Power of Attorney by executing this Power of Attorney, you should provide written notice of the revocation to your prior agent(s) and to the financial institutions where your accounts are located.

You can revoke or terminate your Power of Attorney at any time for any reason as long as you are of sound mind. If you are no longer of sound mind, a court can remove an agent for acting improperly. Your agent cannot make health care decisions for you. You may execute a "Health Care Proxy" to do this.

The law governing Powers of Attorney is contained in the New York General Obligations Law, Article 5, Title 15. This law is available at a law library, or online through the New York State Senate or Assembly websites, www.senate.state.ny.us or www.assembly.state.ny.us.

If there is anything about this document that you do not understand, you should ask a lawyer of your own choosing to explain it to you.

IMPORTANT INFORMATION FOR THE AGENT

When you accept the authority granted under this Power of Attorney, a special legal relationship is created between you and the principal. This relationship imposes on you legal responsibilities that continue until you resign or the Power of Attorney is terminated or revoked. You must:

- (1) act according to any instructions from the principal, or, where there are no instructions, in the principal's best interest;
- (2) avoid conflicts that would impair your ability to act in the principal's best interest;
- (3) keep the principal's property separate and distinct from any assets you own or control, unless otherwise permitted by law;
- (4) keep a record of all receipts, payments, and transactions conducted for the principal; and
- (5) disclose your identity as an agent whenever you act for the principal by writing or printing the principal's name and signing your own name as "agent" in either of the following manner: (Principal's Name) by (Your Signature) as Agent, or (your signature) as Agent for (Principal's Name).

You may not use the principal's assets to benefit yourself or give major gifts to yourself or anyone else unless the principal has specifically granted you that authority in this Power of Attorney or in a Statutory Major Gifts Rider attached to this Power of Attorney. If you have that authority, you must act according to any instructions of the principal or, where there are no such instructions, in the principal's best interest. You may resign by giving written notice to the principal and to any co-agent, successor agent, monitor if one has been named in this document, or the principal's guardian if one has been appointed. If there is anything about this document or your responsibilities that you do not understand, you should seek legal advice.

Liability of agent: The meaning of the authority given to you is defined in New York's General Obligations Law, Article 5, Title 15. If it is found that you have violated the law or acted outside the authority granted to you in the Power of Attorney, you may be liable under the law for your violation.