



Interested Party Authorization Form

Account Registration: _____
Account Number: _____

Please consider this form your authorization to establish an interested party on my investment account. The interest party(ies) below have full authorization to receive the following documentation for my account with your firm:

- Duplicate Statements
- Duplicate Confirmations

Interested Parties:

| | | | |
|---------|-------|---------|-------|
| Name 1) | _____ | Name 2) | _____ |
| Address | _____ | Address | _____ |
| | _____ | | _____ |
| | _____ | | _____ |

| | | | |
|---------|-------|---------|-------|
| Name 3) | _____ | Name 4) | _____ |
| Address | _____ | Address | _____ |
| | _____ | | _____ |
| | _____ | | _____ |

| | |
|-----------------------------|---------------|
| _____ Client's Signature | _____ Date |
| _____ Client's Signature | _____ Date |
| _____ Client's Signature | _____ Date |
| _____ Client's Signature | _____ Date |