

Complete and return to:
TD AMERITRADE Institutional
4075 Sorrento Valley Blvd., Suite A
San Diego, CA 92121

Use this form to authorize TD AMERITRADE to send duplicate trade confirmations, account statements and/or access to all account information to another individual ("interested party").

1

ACCOUNT INFORMATION

Provide the account numbers you are requesting to have duplicate trade confirmations, statements and/or access to all account information mailed or otherwise made available to an interested party.

Brokerage Accounts _____

2

ACCESS LEVEL (PLEASE CHECK ONE)

Duplicate Statements and Confirmations _____ Electronic access through AdvisorClient _____

3

DUPLICATE TRADE CONFIRMATION, ACCOUNT STATEMENT AND OTHER ACCOUNT INFORMATION AUTHORIZATION

I (We) hereby request duplicate trade confirmations, account statements, and/or access to all account information (either in paper or via electronic means) be sent or otherwise made available to the parties indicated below.

Please send to:

Name (First, Middle, Last) _____

Company (if any) _____

Electronic User ID _____

Mailing Address _____

City, State ZIP/Postal Code _____

Name (First, Middle, Last) _____

Company (if any) _____

Electronic User ID _____

Mailing Address _____

City, State ZIP/Postal Code _____

4

AUTHORIZATION AND SIGNATURES

All account owners must sign the form to authorize the above instructions.

Date _____ Signature of Co-owner/Trustee/Authorized Individual _____

Date _____ Signature of Co-owner/Trustee/Authorized Individual _____

