



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