

2.

3.

- B.

Percentage

4. AUTHORIZATION—YOU MUST SIGN BELOW

Note: Don't sign below until you're in the presence of a notary public.

I certify that the information provided in this form is true and complete in all respects.

Name of Current Account Owner (First, middle initial, last) **(Required)**

SIGNATURE

Signature of Current Account Owner

Date (mm-dd-yyyy)

(Your signature must be notarized. See below. We cannot accept a signature guarantee in place of a notary's seal.)

STATE OF _____)
) ss.:

COUNTY OF _____)

This document was acknowledged before me on _____ (date) by _____
(name of Account Owner), who certifies the correctness of the signature of the Account Owner.

SIGNATURE

Signature of Notary

Date (mm-dd-yyyy)

Name of Notary (first, middle initial, last)

My commission expires:

Date (mm-dd-yyyy)

Authorized Officer to place stamp here