

## OPTIONAL AUTHORIZATION DESIGNATION/CHANGE FORM

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1 ACCOUNT HOLDER IN	NFORMATION					
ACCOUNT HOLDER NAME		ACCOUNT NUMBER				
2 REPRESENTATIVE and DEALER DESIGNATION / CHANGE						
Choose one option below:  Appoint New: I hereby instruct Equity Trust Company, to share my account information with and accept investment directions communicated by the Representative/Dealer designated herein. IMPORTANT: Carefully review Section 4 for details on what authorizations a Designated Representative will have as a result of checking this box.						
Revoke: I hereby revoke any and all prior Representative/Dealer designations and elect to not have a Representative/Dealer designated on the above referenced account at this time. I understand that, by making this election, I will be solely responsible for communicating all investment directions for my account to Equity Trust Company.						
Revoke and Replace: I hereby revoke any and all prior Representative/Dealer designations and instruct Equity Trust Company, to share my account information and accept investment directions communicated by the Representative/Dealer designated below. IMPORTANT: Carefully review Section 4 for details on what authorizations a Designated Representative will have as a result of checking this box.						
REPRESENTATIVE/DEALER NAME						
REPRESENTATIVE/DEALER ADDRESS						
TY		STATE		ZIP CODE		
PHONE NUMBER	FAX	EMAIL ADDRESS				
FIRM NAME (IF APPLICABLE)						
FIRM ADDRESS (IF APPLICABLE)						
СІТУ		STATE	ZIP CODE	PHONE NUMBER		
3 INTERESTED PARTY DESIGNATION / CHANGE						
Choose one option below:						
Appoint New: I hereby instruct Equity Trust Co	ompany, to share my account information	on with the Interes	ted Party designated	herein.		
Revoke: I hereby revoke any and all prior Interested Party designations and elect to not have an Interested Party designated on the above referenced account at this time.						
Revoke and Replace: I hereby revoke any and all prior Interested Party designations and instruct Equity Trust Company, to share my account information with the Interested Party designated herein.						
INTERESTED PARTY NAME						
INTERESTED PARTY ADDRESS						
СПУ		STATE ZIP CODE				
PHONE NUMBER	FAX	EMAIL ADDRESS				
FIRM NAME (IF APPLICABLE)						
FIRM ADDRESS (IF APPLICABLE)						
CITY		STATE	ZIP CODE	PHONE NUMBER		



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## 4 ACKNOWLEDGEMENT and SIGNATURE

## By signing below, I hereby make the following representations:

- 1. I acknowledge that my Account is self directed and I am solely responsible for the selection, management, and retention of all investments held within my Account. I understand and acknowledge that Equity Trust Company will exercise no discretion with respect to the funds in my Account, will not under any circumstances provide investment advice or recommendations, and will in all events invest all of the funds in my Account solely and exclusively at my direction. I further understand that I am not entering into a "trust" agreement with Equity Trust Company, but rather I am entering into a "custodial" agreement under which Equity Trust Company has no duties or responsibilities with respect to the investment of the funds in my Account. Finally, I understand and intend that Equity Trust Company shall not assume the responsibilities of a trustee, a "fiduciary," or a person entitled to exercise any discretionary authority with respect to the funds in my Account, as those terms and concepts are defined in the Internal Revenue Code, ERISA, or other applicable federal, state or local laws.
- 2. I understand that if I have chosen to appoint a Representative in Section 2 of this form, or should I ever appoint a Representative on a form acceptable to Equity Trust Company, such person is my agent and is not in any way an agent, employee, or representative of Equity Trust Company. I understand that Equity Trust Company has not made and will not make any recommendation or investigation with respect to my Representative, nor does Equity Trust Company compensate my Representative in any manner.
  - A. By appointing a financial advisor, broker, financial planner or other person as a Designated Representative to your individual retirement account, you should understand that this person:
    - is authorized to give investment directions on your behalf to Equity Trust Company
    - · will have unlimited access to your Account information, and
    - will receive copies of your Account statements and other correspondence
  - B. By selecting this option, you are appointing the person(s) indicated as your Representative on your Equity Trust Company account for the purpose of communicating investment directions to Equity Trust Company and receiving information on your Account, in accordance with Section 8.03 of the terms of the *Individual Retirement Account Custodial Agreement and Disclosure Statement*. You are acknowledging that:
    - You understand that even if a third party or firm suggested that you retain Equity Trust Company's services as custodian, your Representative is your authorized agent and is not in any way an agent, employee, or representative of Equity Trust Company, or its affiliates.
    - You understand that Equity Trust Company does not compensate (nor does it receive compensation from) any Representative you might designate.
    - You understand that your Representative may be a registered representative of a broker dealer organization, a financial advisor or other person that you deem acceptable
    - You understand that Equity Trust Company has not made and will not make any recommendation or investigation with respect to your appointed representative.
    - You understand that you may appoint and/or remove your Representative at any time by delivering written notice on a form acceptable to
      Equity Trust Company. If you remove your representative, you understand that such removal shall not have the effect of cancelling any notice,
      instruction, direction or approval received by Equity Trust Company from your removed Representative before Equity Trust Company receives
      your notice of removal.
    - You instruct Equity Trust Company to pay for or receive payment from security or other investment transactions communicated by your Representative as shown below, as indicated by broker confirmations of trade or other requests for payment received by Equity Trust Company.
    - You understand that it is solely your responsibility to direct your Representative to execute trades or other investments for your Equity Institutional account, and all instructions, directions, and/or confirmations received from your Representative, his agent(s), or his broker dealer, whether written or oral, shall be assumed by Equity Trust Company to have been authorized by you.
    - Without limitation, you agree to indemnify and hold Equity Trust Company and its affiliates harmless for any loss or breach of any kind which
      may result from any action or inaction that it takes or omits in good faith in accordance with, and in its reliance upon, any certificate, notice
      confirmation, instruction, or other written or oral (if so elected) communication purporting to have been delivered at your direction on behalf
      of your Account by your Representative or brokerage firm.
- 3. I understand that if I have chosen to appoint an Interested Party in Section 3 of this form, I am authorizing Equity Trust Company to release and make available information regarding my account to the following person and/or firm, including copies of quarterly statements or other written, verbal, or electronic communications. I understand that Equity Trust Company will not accept transaction instructions or account maintenance changes from this individual.
  - · Any Interested Party or firm designated is my agent only and is in no way affiliated with Equity Trust Company.
  - I understand that even if a third party or firm suggested that I retain Equity Trust Company's services as Custodian, such third party or firm is not in any way an agent, employee, representative or affiliate of Equity Trust Company.
  - · Equity Trust Company has not made and will not make any recommendations or investigation with respect to my Interested Party or firm.
  - · Equity Trust Company does not compensate (nor does it receive compensation from) my Interested Party or firm.

ACCOUNT HOLDER SIGNATURE	DATE