

Account # _____

Advisor # _____

Use this form to authorize TD AMERITRADE to send duplicate trade confirmations and account statements, and/or provide 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 Advisor Client

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 Code:
Name (First, Middle, Last):	Company (if any):	Electronic User ID:
Mailing Address:		
City:	State:	ZIP Code:

4 AUTHORIZATION AND SIGNATURES

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

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

Print Name of Co-owner/Trustee/Authorized Individual _____

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

Print Name of Co-owner/Trustee/Authorized Individual _____



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