



Mail Authorization Form

Account Number _____

Pursuant to N.Y.S.E. rule 409, the undersigned authorizes you to forward all mail in their name in care of and to the legal address listed below:

No mail is to be sent to any other legal address than the one listed above.

I have checked all applicable boxes listed below.

- I currently reside at the above legal address.
- My permanent legal address (if different than above) is as follows:

Very truly yours,

X _____

X _____