

Account # \_\_\_\_\_

Advisor # \_\_\_\_\_

<p><b>AT TD AMERITRADE:</b></p> <p>Title: _____</p> <p>Number: _____</p> <p>SS/Tax ID #: _____</p>	<p><b>AT RECEIVING INSTITUTION:</b></p> <p>Title: _____</p> <p>Number: _____</p> <p>SS/Tax ID #: _____</p>
<p><b>RECEIVING INSTITUTION INFORMATION:</b></p> <p>Name: _____</p> <p>Address: _____</p> <p>Phone #: _____</p> <p>Primary Contact: _____</p>	<p><b>BANK DETAIL (WIRES ONLY):</b></p> <p>Name: _____</p> <p>ABA #: _____</p> <p>Phone #: _____</p> <p>Primary Contact: _____</p> <p>Institution's Acct. # at Bank: _____</p>
<p>I, the undersigned, hereby grant <u>KRASNEY FINANCIAL, LLC</u> (Agent) authority to direct disbursement of funds from my TD AMERITRADE, Inc. ("TD AMERITRADE") account by check, wire transfer, withdrawal and other forms of disbursement, to the above named financial institution, for my benefit. I will indemnify and hold TD AMERITRADE and its directors, officers and employees harmless from all liabilities and costs, including attorney fees, which TD AMERITRADE may incur by relying upon the representations of Agent or upon his authorization.</p> <p>This authorization will remain in full force and effect until revoked by me by a written notice delivered personally or sent by registered mail or certified mail to the TD AMERITRADE office serving my account. This authorization shall extend to the benefit of your successors and assigns.</p>	
<p>_____ Client's Signature</p> <p>_____ Client's Signature (multiple account owners or trustees)</p> <p>_____ Client's Signature (multiple account owners or trustees)</p> <p>_____ Client's Signature (multiple account owners or trustees)</p>	<p>_____ Date</p> <p>_____ Date</p> <p>_____ Date</p> <p>_____ Date</p>

TD AMERITRADE Institutional  
4075 Sorrento Valley Blvd., Suite A  
San Diego, CA 92121

TDWI 9020 REV. 03/08

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