

Corporate Resolution

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Instructions: This form must be submitted when a corporate account is being opened. It designates officers who are specifically authorized to give instructions on behalf of the corporation. If the account being opened is for an incorporated non-profit organization a copy of the organization's most recent IRS Form 990 must be submitted with this form.

Please mail the completed form to LPL Financial, Attn: Trade Direct, P.O. Box 509049 San Diego, CA 92150-9049 or fax to (858) 202-8500.

count Information						
LPL Account Number	Account R	egistration				
ection I: Corporate Information						
Name of Corporation				Date of Board of Direc	tors Meeting	
Is this account for a Government Entity?	Yes No What ty	ype of corporation	on is the acc	count? S Corporat	ion C Corporation	
*Please consult your client, this is important for t	ax reporting purposes.					
Document Type Articles of Incorporation	Business License	Partnership A	_	Certificate of Good	d Standing	
Document Number (Tax ID/SSN not acceptable)		Place of Issuan	ce			
Document Issuance Date		Document Expiration Date (if applicable)				
ection II: Authorized Officers Inform	nation					
President / CEO Information						
President / CEO			Soci	ial Security Number		
Residence Address (no P.O. boxes)	as mailing address		Date	e of Birth	Home Phone	
			MM.	/ DD / YYYY		
Country of Citizenship Place of Issua	nce ID Issua	nce Date ID	Expiration	Date ID Type	ID Number	
Mark here and complete the below inform financial interest in, controls trading in, or where you are employed by FINRA or asso domestic partner, or other immediate famil	has discretionary authority ciated with a broker/dealer	y over this accou r or municipal sec	nt (e.g., acc curities deale	counts for minor childre er. This also includes sit	en). This includes situation uations where your spous	
LPL will notify FINRA, the broker/dealer, or the and other information concerning the account. I listed above to FINRA, the broker/dealer, or mu	By completing and signing	this new account				
Full Name of Person Associated with Firm or FINRA	Relationship to Account H Person Associated with F			Name of Associated Fi	rm (if FINRA, list FINRA)	
Address of Person Associated with Firm or FINR	Δ	Corporate (Compliance	Mailing Address of firm		
or in the second			•			
Mark here if you or any member of your im			r, director,	Name of Corporation(5)	

Account Number						C
Vice President / COO						
Vice President / COO				Social Secu	rity Number	
		J				
Residence Address (no P.O. boxes)	Same as mailing add	aress		Date of Birt	h	Home Phone
				MM / DD / YY	YY	
Country of Citizenship Pla	ace of Issuance	ID Issuance Date	ID Expir	ation Date	ID Type	ID Number
	acc or issuance	ID ISSUATICE Date		ation Bate	Бтурс	To realise
Mark here and complete the be financial interest in, controls trawhere you are employed by FIN domestic partner, or other immed	ding in, or has discretio IRA or associated with a ediate family member is e	nary authority over this broker/dealer or municip employed by FINRA or as	account (e.goal securities associated wi	g., accounts f s dealer. This th a broker/d	or minor childr also includes sit ealer or municip	en). This includes situat tuations where your spo pal securities dealer.
and other information concerning the listed above to FINRA, the broker/de	e account. By completing	and signing this new ac	count applic	cation, you au	thorize LPL to p	e statements, commat provide transactional dat
Full Name of Person Associated with Firm or FINRA		o to Account Holder of ociated with Firm or FINR	RA .	Name	of Associated F	Firm (if FINRA, list FINRA
Address of Person Associated with Fi	rm or FINRA	Corpo	orate Compl	iance Mailing	Address of firm	1
Mark here if you or any member	r of your immediate fami	ly has been a corporate	officer dire	ctor Name	of Corporation	(s)
or owner of 10% or more of any Treasurer / CFO Information		<u> </u>				
Treasurer / CFO				Social Secu	rity Number	
Residence Address (no P.O. boxes)	Same as mailing ad	dress		Date of Birt	h	Home Phone
				MM / DD / YY	YY	
Country of Citizenship Pla	ace of Issuance	ID Issuance Date	ID Expir	ation Date	ID Type	ID Number
Mark here and complete the be financial interest in, controls tra where you are employed by FIN domestic partner, or other imme	nding in, or has discretio IRA or associated with a	nary authority over this broker/dealer or municip	account (e.goal securities	g., accounts f s dealer. This	or minor childr also includes sit	en). This includes situat tuations where your spo
LPL will notify FINRA, the broker/de and other information concerning the listed above to FINRA, the broker/de	e account. By completing	and signing this new ac				
Full Name of Person Associated with Firm or FINRA		o to Account Holder of ociated with Firm or FINR	RA.	Name	of Associated F	Firm (if FINRA, list FINRA
Address of Person Associated with Fi	rm or FINRA	Corpo	orate Compl	iance Mailing	Address of firm	1
Address of Person Associated with Fi	rm or FINRA	Corpo	orate Compl	iance Mailing	Address of firm	n

Other Officer Information					C	
Other Officer			Soc	ial Security Number		
Residence Address (no P.O. boxes)	nailing address		Dat	e of Birth	Home Phone	
			⊣ Ым	/ DD / YYYY		
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Mark here and complete the below information financial interest in, controls trading in, or has where you are employed by FINRA or associated domestic partner, or other immediate family mediate.	discretionary authority ad with a broker/dealer	over this account or municipal securi	(e.g., ac ties deal	counts for minor child er. This also includes s	dren). This includes situati situations where your spou	
LPL will notify FINRA, the broker/dealer, or the mu and other information concerning the account. By colisted above to FINRA, the broker/dealer, or municip	ompleting and signing tl	his new account ap				
Full Name of Person Associated with Firm or FINRA	Relationship to Account Holder of Person Associated with Firm or FINRA			Name of Associated Firm (if FINRA, list FINRA)		
Address of Person Associated with Firm or FINRA		Corporate Cor	nnliance	Mailing Address of fir	m	
Address of Ferson Associated with Fifth of Flinka			прпапсс	Tridining Address of the	111	
Mark here if you or any member of your immed or owner of 10% or more of any public corporate.			lirector,	Name of Corporatio	n(s)	
tification						
tilication						
you and delivered at your office at LPL Financial LI I further certify that the following are the signatures		tull tarca and atta	ct until v	urittan natica of ite r	te the authority hereby	
President/CEO Signature	-	e Drive, San Diego, s) authorized by the	foregoir In witne affixed the	21." ng resolution to act for ss whereof, I have he ne seal of said organiz	evocation addressed to this Corporation: ereunto set my hand and ation this day:	
	of the officers (or others	e Drive, San Diego, authorized by the	foregoir In witne affixed the	21." ag resolution to act for ss whereof, I have hose seal of said organize Seal (If there is	evocation addressed to this Corporation: ereunto set my hand and ation this day:	
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President/CEO Signature Vice-President/COO Signature	Date	e Drive, San Diego , s) authorized by the	foregoir In witne affixed the Corporate "None."	21." Ingresolution to act form Instruments whereof, I have he Instruments and organize Seal (If there is	evocation addressed to this Corporation: ereunto set my hand and	
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President/CEO Signature Vice-President/COO Signature Treasurer/CFO Signature Other Officer's Signature Secretary or Appointing Officer's Name (print)	Date Date	e Drive, San Diego , s) authorized by the	foregoir In witne affixed the Corporate "None."	21." Ingresolution to act form Instruments whereof, I have he Instruments and organize Seal (If there is	evocation addressed to this Corporation: ereunto set my hand an ation this day:	