Trustee Certification of Investment Powers



Trust Information

Sub Firm: 211 Account #:

In consideration of TradePMR and First Clearing* (as clearing firm) (collectively, "you") opening and/or maintaining one or more accounts (each, an "Account") for the Trust named below, the undersigned Trustee(s) hereby certify, swear under penalty of perjury, and acknowledge that the following information is accurate and complete:

1.	The manner of taking title to the Trust property is: Name of Trust:
	Name of Trustee(s):
2.	The Trust is in full force and effect, and the date of the agreement or will (the "Trust Agreement") that established the Trust is: Date of Formation:
3.	The date(s) of amendment(s) to the Trust Agreement (if any):
4.	The name(s) (If multiple trustees are listed, co-trusteeship is presumed) of the Successor Trustee(s) (if any):
	You may rely on the authority of the Successor Trustee(s) without proof of their succession. [NOTE: If the Trustee(s) fail to identify and, if applicable, update names of Successor Trustee(s) in this Certification, each of undersigned acknowledges that you may require a legal opinion and/or other documentation prior to allowing a Successor Trustee(s) to act.]
5.	The grantor(s), settlor(s) or testator who established the Trust is/are:
6.	The Trust's taxpayer identification number is:
7.	The Trust is governed by the law of the state , or other jurisdiction , of:
8.	The Trust is (check one): Revocable and the name of the person holding the power to revoke the Trust is:
9.	Are there grantors who are not trustees? (revocable trust only) □ Yes □ No If yes, please fill out the Grantor Supplement form
10	Are there any deceased grantors? (revocable trust only) Ves No If yes, please fill out the Grantor Supplement form
11	Any notice sent by you to any of us, including notice sent electronically, will constitute a notice to all Trustee(s).

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7 Specific Investment Powers

12. We certify that we have the power under the Trust Agreement and under applicable state or local law to enter into transactions, both purchases and sales, of the types specified below. (Indicate types of investments which are permitted, including the specific level of option activity permitted, if applicable.)

Transactions (choose all that apply):
☐ A. Corporate Stocks
☐ B. Corporate Bonds
☐ C. Municipal Securities
☐ D. U.S. Agency Securities
☐ E. U.S. Government Securities
☐ F. Unit Investment Trusts
☐ G. Mutual Funds
☐ H. Limited Partnerships
☐ I. Annuities
☐ J. Margin Transactions (Including Short Sales)**
☐ K. Other:
Option Transactions*** (choose one):
☐ Level 1 - Covered Call Writing, Buying Puts Against Long Positions (Married Puts)
☐ Level 2 - Level 1 Plus Put Writing Against Full Deposit of Strike Price (Covered Puts)
☐ Level 3 - Level 2 Plus Options Buying, Purchasing Put/Call Warrants
☐ Level 4 - Level 3 Plus Option Spreading
☐ Level 5 - Level 4 Plus Uncovered Put Writing vs. Buying Power
☐ Level 6 - Level 5 Plus Uncovered Straddles, Uncovered Call Writing

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^{*}Account(s) carried by First Clearing. First Clearing is a trade name used by Wells Fargo Clearing Services, LLC, a registered broker-dealer and non-bank affiliate of Wells Fargo & Company.

^{**} Margin: If margin transactions are permitted and specified above, a properly completed Margin Agreement must be submitted and approved.

^{***}Options: If option transactions are permitted and specified above, a properly completed Option Agreement must be submitted and approved.

3 Investment, Transfer, Disbursement, and General Powers and Authority

13.	Each of the undersigned certifies as follows: I have the following powers under the Trust Agreement and under applicable law, and you are authorized to accept instructions from any (INSTRUCTIONS: Enter number, if no number is inserted, it is presumed to be ONE) of the individuals or entities listed below for any transaction on the Account, including, but not limited to: (a) giving orders for any securities transactions, (b) requesting or writing checks from the Account in any amount, including the entire balance of the Account, payable in the name of the Trust OR any of the Trustee(s) individually OR to any third party, (c) transferring any or all assets in the Account to or for the benefit of the Trust OR any of the Trustee(s) individually OR any third party, or (d) giving any other instructions required or permitted on the Account. You have no duty to determine whether the Trustee(s) are acting in accordance with the terms of the Trust Agreement. NOTWITHSTANDING THE FOREGOING, YOU MAY AT ANY TIME REQUIRE WRITTEN OR VERBAL CONSENT OF ALL TRUSTEE(S) TO ANY TRANSACTION AS YOU SOLELY DETERMINE, AND YOU WILL NOT HAVE LIABILITY FOR REFUSING TO ACT ON INSTRUCTIONS OF LESS THAN ALL OF THE TRUSTEE(S).
14.	Each of the undersigned certifies as follows: we have the power under the Trust Agreement and applicable law to transfer any or all of the Trustee's fiduciary authority to one or more third parties pursuant to a duly executed power of attorney, delegation of authority or other similar document. (NOTE: Each Trustee acknowledges that you may require an opinion of trust counsel prior to accepting a power of attorney or other delegation of authority on this Account.) Check here if this Section is not applicable:
15.	Each of the undersigned Trustee(s) agrees that the Account will continue to be bound by all agreements and documents currently governing the Account.
16.	We, the Trustee(s), jointly and severally, in our personal capacities and on behalf of the Trust, agree to indemnify you and each of your affiliates, officers, directors, employees and agents from, and hold such persons harmless from, any claims (including attorney fees), judgments, expenses, liabilities or costs of defense or settlement arising out of or relating to breach of any representation or warranty made herein, or from effecting transactions pursuant to instructions given by any of the Trustee(s) or Successor Trustees listed herein or by any third party named pursuant to a duly executed power of attorney, delegation of authority, or other similar document or otherwise acting in reliance on these representations and warranties.
17.	We certify that we have received the advice of our legal counsel in connection with all these certifications and acknowledgements.
18.	We acknowledge that you will be relying solely on our certifications herein, and that you will not make any review or interpretations of the Trust Agreement for all matters relating to such certifications and operation of the Account(s), even if you are provided with a copy of the Trust Agreement.
19.	The Trust has not been revoked, modified, or amended in any manner which would cause the representations contained in this Trustee Certification to be incorrect. We agree to inform you, in writing, immediately if (a) there is any subsequent amendment to the Trust Agreement, including any change in Successor Trustee(s), (b) any Trustee dies or becomes incapacitated, or (c) there is any other change in the composition of the Trustee(s) or any other event which could materially alter this Trustee Certification. In the event of the death or incapacity of one or more of the Trustee(s), you may continue to act on the instructions or any of the remaining Trustee(s) unless we specifically notify you otherwise in writing and provide you with an updated Trustee Certification.
20.	We hereby certify that the undersigned are all of the Trustee(s) of the Trust. Should only one person execute this Trustee Certification, such signature shall be deemed a representation that the signer is the sole Trustee of the Trust.

△ Certification — ALL ACCOUNT OWNERS MUST SIGN

ALL TRUSTEE(S) MUST SIGN

Trustee Signature	Print Name	Date
Trustee Signature	Print Name	Date
Trustee Signature	Print Name	Date
Trustee Signature	Print Name	Date

CA, CO, DE, ID, IA, KS, MI, MN, MS, NE, NV, SD, TN and VT require notarization of all Trustee signatures for Trusts established under their laws. If the Trust is established in one of those states (see Section 7 above), please complete a notary block for each Trustee listed above.

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NOTARY – Trustee Signature 1	
A notary public or other officer completing this certificate verifies only the ide to which this certificate is attached, and not the truthfulness, accuracy, or val	
State	,
County	
Subscribed to and sworn before me	
This in Year	
Signature of Official Administering Oath	SEAL
My Commission expiresYear	
NOTARY – Trustee Signature 2	
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State	inity of that document.
County	
Subscribed to and sworn before me	
This in Year	
Signature of Official Administering Oath	SEAL
My Commission expiresYear	
NOTARY – Trustee Signature 3	
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