

LIMITED POWER OF ATTORNEY – PURCHASES & SALES OF SECURITIES

TO:

1. The undersigned (hereinafter referred to as the “customer”) hereby authorizes _____
 _____(whose signature appears below) as his agent and attorney in fact to buy, sell (including short sales), pledge, and trade in stocks, bonds, and options on margin or otherwise, in accordance with your terms and conditions, for the customer’s account and risk and in the customer’s name or number on your books. The customer hereby agrees to indemnify and hold you harmless from and to pay you promptly on demand any and all losses or indebtedness arising therefrom.
2. In all such purchases, sales or trades, you are authorized to follow the instructions of the aforesaid agent in every respect concerning the customer’s account with you; and except as herein otherwise provided, he is authorized to act for the customer in the same manner and with the same force and effect as the customer might or could do with respect to such purchases, sales, or trades as well as with respect to all other things necessary or incidental thereto, EXCEPT THAT HE IS NOT AUTHORIZED TO WITHDRAW ANY MONEY, SECURITIES, OR OTHER PROPERTY EITHER IN THE NAME OF THE CUSTOMER OR OTHERWISE.
3. The customer hereby ratifies and confirms any and all transactions with you heretofore or hereafter made by the aforesaid agent on behalf of or for the account of the customer.
4. This authorization and indemnity is in addition to (and in no way limits or restricts) any rights, which you may have under any other agreement or agreements between you and the customer.
5. The customer represents that the aforesaid agent will receive no remuneration, either direct or indirect, for his services render pursuant to this authorization, in connection with any transactions executed on any exchange which prohibits remuneration to an agent.
6. The aforesaid agent is authorized to approve and agree to the correctness of statements of transactions in the account of the customer, including a statement of indebtedness and securities held by you, as submitted by your auditors periodically.
7. This authorization and indemnity is also a continuing one and shall remain in full force and effect until revoked by the customer by a written notice addressed to you and delivered to you at the office where the customer’s account is carried, but such revocation shall not affect any liability in any way resulting from transactions initiated prior to such revocation. This authorization and indemnity shall inure to the benefit of your present corporation or corporations, and of the assigns of your present corporation or any successor corporations.

Dated: _____ X _____

 _____ X _____
 (City) (State) Signature(s) of Customer
 (IF THIS IS A JOINT ACCOUNT, BOTH PARTIES MUST SIGN)

Witness:

 Account Number

SIGNATURE OF AUTHORIZED AGENT:

Authorized Agent/ Attorney-In-Fact	NAME		PHONE NUMBER
	ADDRESS		DATE OF BIRTH
	CITY		STATE ZIP CODE
	U.S. CITIZEN Yes No	IF NO WHAT COUNTRY?	PASSPORT #

Bank Account Reference	NAME OF BANK		
	ADDRESS		
	CITY		STATE ZIP CODE
	ACCOUNT NUMBER	ACCOUNT TYPE Checking Savings Money Market	

Employment Information	NAME OF COMPANY
	POSITION
	DO YOU OR THE OWNER ON THIS ACCOUNT WORK FOR OR ARE AFFILIATED WITH A SECURITIES FIRM, BANK INSURANCE OR TRUST COMPANY? IF YES, PLEASE SPECIFY

	ARE YOU OR THE OWNER ON THIS ACCOUNT A DIRECTOR, OFFICER, OR 10% SHAREHOLDER ON ANY PUBLICLY OWNED COMPANY? IF YES, PLEASE SPECIFY