

NOTICE OF PERMISSION DESIGNATION

Forward To: 214 West 9th Street

PO Box 420

Onaga, KS 66521-0420 P: 800.521.9897 F: 913.901.4190

customerservice@mainstartrust.com

Please Print or Type			
ACCOUNTHOLDER INFORMATION			
Accountholder Name		Account Number	
NOTICE OF PERMISSION			
Please complete the information below to authorize your spouse or other individuals of your choosing to receive verbal information about your account. Please note that this individual(s) will have unlimited access to your account information. They will not be able to make changes to your account or initiate transactions or trades.			
	Name of Individual	Relationship	Last 4 digits of SSN, EIN or agreed upon password (for identifying purposes only)
1.			
2.			
3.			
This designation will remain in effect until the custodian has received written notice of revocation from the accountholder. Accountholder agrees to indemnify and hold harmless Mainstar Trust, against all claims, actions, costs and liabilities, including attorneys' fees, arising out of their reliance on this designation. This indemnity and hold harmless provision shall survive any termination of this designation.			
AUTHORIZED SIGNATURE			
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A	ccountholder Signature		Date