

Corestone™ Account Application

STEP 1. ESTABLISH YOUR CORESTONE™ ACCOUNT

Account Title	Account Number
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STEP 2. SELECT ACCOUNT FEATURES

Please select **ONE** option under the appropriate Corestone account Level.

Platinum Level

- Checks and a Platinum Debit Card
- Checks ONLY
- Platinum Debit Card ONLY

Gold Level

- Checks and a Gold Debit Card
- Checks ONLY
- Gold Debit Card ONLY

Silver Plus Level

- Checks and a Silver Debit Card
- Silver Debit Card ONLY

Silver Level

- Checks ONLY

Check Style

If you chose an account with checks, please select a check style.

- Personal wallet checks (default option) Personal duplicate checks Business style checks
- Electronic (checking account information provided via a letter)

STARTING CHECK NUMBER DEFAULTS TO 0101.

Check Options

The name and address that appears on your checks will be taken from the primary mailing address on your brokerage account unless you select one of the following.

- No address on checks
- Print the alternate mailing address on my checks from "Alternate Mailing Address" section below

You may check the box below to add one extra line of information on your checks, such as your telephone number. Please enter any additional information you would like to include (maximum of 32 characters, including spaces).

- Additional information _____

Alternate Mailing Address (optional)

All checks, checking information letter and/or debit cards will be sent to the primary mailing address for your brokerage account unless an alternate mailing address is entered below for the delivery of the initial order.

Address		
City	State	Zip/Postal Code
Province/County/Subdivision	Country	

IF YOU WANT THIS ALTERNATE ADDRESS TO APPEAR ON YOUR CHECKS, BE SURE TO CHECK THE APPROPRIATE BOX IN "CHECK OPTIONS".

If you are requesting an alternate mailing address, the primary account owner (for individual and joint accounts) or authorized person (for corporate, trusts or other entity accounts) must sign and date here.

Print Name	Date
Signature	



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STEP 7. SIGNATURES OF ACCOUNT OWNER(S), AUTHORIZED PERSONS AND ADDITIONAL SIGNATORIE(S) (MANDATORY)

All Individual and Joint Account Owners must sign below and agree to the terms of the Account. For corporate, limited liability company, partnership, trust or other legal entity Accounts, all authorized persons who have authority over the Account must sign below and agree to the terms of the Account.

BY SIGNING THIS APPLICATION, I ACKNOWLEDGE THAT SECURITIES NOT FULLY PAID FOR BY ME MAY BE LOANED TO PERSHING OR LOANED OUT BY PERSHING TO OTHERS.

I AGREE THAT THIS AGREEMENT CONTAINS A PREDISPUTE ARBITRATION CLAUSE, WHICH IS LOCATED IN SECTIONS B.23 AND B.24 ON PAGES 4 AND 5 IN THE AGREEMENT. I ACKNOWLEDGE RECEIVING A COPY OF THIS AGREEMENT.

Print Name (maximum 21 characters)	Social Security or Tax ID Number	Date of Birth	
Signature X	Date	Mother's Maiden Name or Code Name (max 13 characters)	Debit Card <input type="checkbox"/> Yes <input type="checkbox"/> No

Print Name (maximum 21 characters)	Social Security or Tax ID Number	Date of Birth	
Signature X	Date	Mother's Maiden Name or Code Name (max 13 characters)	Debit Card <input type="checkbox"/> Yes <input type="checkbox"/> No

Print Name (maximum 21 characters)	Social Security or Tax ID Number	Date of Birth	
Signature X	Date	Mother's Maiden Name or Code Name (max 13 characters)	Debit Card <input type="checkbox"/> Yes <input type="checkbox"/> No

Print Name (maximum 21 characters)	Social Security or Tax ID Number	Date of Birth	
Signature X	Date	Mother's Maiden Name or Code Name (max 13 characters)	Debit Card <input type="checkbox"/> Yes <input type="checkbox"/> No

Print Name (maximum 21 characters)	Social Security or Tax ID Number	Date of Birth	
Signature X	Date	Mother's Maiden Name or Code Name (max 13 characters)	Debit Card <input type="checkbox"/> Yes <input type="checkbox"/> No

Print Name (maximum 21 characters)	Social Security or Tax ID Number	Date of Birth	
Signature X	Date	Mother's Maiden Name or Code Name (max 13 characters)	Debit Card <input type="checkbox"/> Yes <input type="checkbox"/> No

Additional Signatories

Optional: For Checkwriting ONLY. If you have an individual or joint account and would like to authorize individuals who are not listed in the account registration to sign checks, each additional signatory must provide all information and sign below.

Print Name (maximum 21 characters)	Social Security or Tax ID Number	Date of Birth	
Signature X	Date	Mother's Maiden Name or Code Name (maximum 13 characters)	

Print Name (maximum 21 characters)	Social Security or Tax ID Number	Date of Birth	
Signature X	Date	Mother's Maiden Name or Code Name (maximum 13 characters)	

The primary account owner authorizes the additional signatories on this application by signing below.

Primary Account Owner Name	Date
Signature X	

