

Action required

Letter of Authorization

Instructions: If you have an existing Merrill CMA brokerage account and are requesting to update the registration into a Trus	st account. Please
complete this authorization form and include it with your Trust application or Client Relationship Agreement and Trustee Cer	rtification Form.

Merrill Account Number:			
Print names of all existing account owners			
l/We,			
hereby request that the above account be	changed to reflect t	he title of my/our Trust.	
Print the title of the Trust (e.g., The John and Jane Do	e Revocable Trust)		
		<u></u>	
By submitting this letter of authorization, I	/we certify the follo	owing:	
• Updating the account registration of the Trustee Certification Form.	account to the abo	ve-named Trust will be in accordance with the	terms of the Merrill Lynch
	ny new account owr	ners to this account, as trustee(s), will assume b	oeneficial ownership on
• I/we acknowledge that the Trust will con for tax reporting purposes.	tinue to use the sar	me Tax Identification Number currently reflecte	ed on the above account
Signature of Existing Account Owner	Date	Signature of Existing Account Owner	Date
Signature of Existing Account Owner	Date	Signature of Existing Account Owner	Date

Return all documents to:

Merrill Document Processing PO Box 31024 Tampa, FL 33631-3024

Overnight mail to: Merrill Document Processing FL1-908-01-36 4909 Savarese Circle Tampa, FL 33634

Or fax to: 1.877.229.7160

If you have any questions, please contact the Merrill New Account Support Team at 844.677.2542, Option 3, between 8 a.m. and 8 p.m. Eastern, Monday through Friday. Be sure to have your account number or trust identification number available when you call.

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Are Not FDIC Insured	Are Not Bank Guaranteed	May Lose Value
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