BNY | INVESTMENTS

BNY Brokerage Services P.O. Box 958408 Lake Mary, FL 32795

CERTIFICATION FOR NON-BNY LEGAL/DURABLE POWER OF ATTORNEY

Use this form to certify the validity of a Power of Attorney for **Brokerage accounts only**.
The Attorney in Fact (Agent) must complete all sections and a Notary is required on this form. Please attach a copy of the valid Power of Attorney form dated within the past three years.

If you have any questions please call a BNY Brokerage Account Representative at 1-800-843-5466.

Customer Information:

_____
Account Number

_____ _____
Name of Registered Owner *Social Security Number/Tax Identification*

_____ _____
Name of Joint Owner *Social Security Number/Tax Identification*

_____
Address

Attorney in Fact Information:

_____ _____
Name of Designated Power of Attorney (Attorney in Fact) *Social Security Number*

_____
Power of Attorney Address *Date of Birth*

_____
Phone Number

Citizenship of Agent _____
If you are not a U.S. Citizen, please check box, and specify country of legal residence: _____. If you do not have a social security number, also provide IRS form W-8, and a copy of your passport, alien ID card or other government issued document with residence and photograph.

Agents Employment/Affiliation Information:

We are required by industry regulations to obtain this information.

❑ If you (The Agent) are not employed or have retired, please check here and state your source of income: _____

_____
Occupation *Employer*

_____
Employer's Address

Is the Agent either a senior military, governmental or political official in the U.S. or a non-U.S. country or closely associated with an immediate family member of such official? ❑ Yes ❑ No

If yes, identify name of official, office held and country.

_____

Please check below if applicable:

Individual or Custodian	Joint	
❑	❑	I am affiliated with or work for The Bank of New York Mellon Corporation or one of its affiliates.
❑	❑	I am affiliated with or work for a stock exchange, a member firm of an exchange or FINRA.
❑	❑	I am a director/10% shareholder/policy-making executive officer of the publicly traded company listed: _____.

If so, notification of your intent to be added to this account will be sent to your employer in accordance with current regulations.

Certification:

I, the above referenced Power of Attorney, do hereby certify that the attached:

Select one:

❑ **Durable Power of Attorney** This document remains valid if the principal is currently or becomes incapacitated. This document will become void upon the death of or revocation by the principal.

❑ **Conditional** This document will become valid upon the incapacitation of the principal. Proof of incapacitation must be attached to this document. Conditional Powers of Attorney will only be added when they become **effective** and are accompanied by proper documentation verifying that the Power of Attorney is in full force and effect (i.e. Doctor's certification that principal is incapacitated).

is in full force and effect, and to the best of my knowledge, after diligent search and inquiry, affirm that:

1. I am the Attorney in fact named in the power of attorney executed by _____ as principal on _____ date.

CERTIFICATION FOR NON-BNY MELLON LEGAL/DURABLE POWER OF ATTORNEY

Continued

2. The principal is not deceased, and has not revoked or partially or fully terminated or suspended this power of attorney.
3. There is currently no petition to determine incapacity or appoint a guardian for the principal at his time.
4. I agree not to exercise any powers granted to me by this Power of Attorney if I know of or have a reason to know that it has been revoked, partially or completely terminated, suspended or is no longer valid due to any reason whatsoever; including without limitation, death or adjudication of incapacity of the principal.
5. I agree not to give, transmit, convey or issue any instructions concerning the above referenced account that I know, or believe are in non-compliance with or in violation of the attached Power of Attorney.
6. For the purpose of requesting BNY Brokerage Services to act upon my instructions, I do fully indemnify and hold harmless BNY Brokerage Services and its affiliates, control persons, officers, directors and employees from and against any and all losses, liabilities, claims and costs (including attorneys' fees) resulting from transactions made in accordance with my instructions.
7. The attached Power of Attorney will remain in full force and effect until such time as written notification of The Death of the Account Holder or significant alteration is received by BNY Brokerage Services at: BNY Brokerage Services, 144 Glenn Curtiss Blvd, Uniondale, New York, 11556.

By signing below, you, the authorized Agent:

- acknowledge that you have received a copy of the BNY Brokerage Account Client Agreement and Related Disclosures Booklet, and that you understand and agree to the terms.
- certify that the information supplied in this form is complete and correct.
- permit us to obtain credit information, verify information you have provided, and perform a background check on you, and to reject or remove you as authorized agent from this or any other account, at any time and for any reason we see fit.
- agree to notify us in writing immediately upon the death or disability of the last surviving account owner.

Pre-Dispute Arbitration Clause — I acknowledge that the BNY Brokerage Account Client Agreement and Related Disclosures Booklet contains a pre-dispute arbitration clause which provides that all disputes relating to the BNY Brokerage Account are to be resolved by binding arbitration. This clause is found in Sections 27 and 28 of the BNY Brokerage Account Client Agreement and Related Disclosures Booklet.

Signature of Attorney in Fact (Agent) **Date**

FOR NOTARY PUBLIC USE ONLY:

Sworn to (or affirmed) before me this

_____ *day of* _____ , 20___

_____

(Give official capacity of official administering oath.)

My commission expires _____

(AFFIX SEAL.)

X_____

Signature of Notary Public

Please mail this completed form to:

BNY Brokerage Services
P.O. Box 958408
Lake Mary, FL 32795

For Registered, Certified or Overnight Mail, please mail to:

BNY Brokerage Services
600 Colonial Center Parkway
Suite 400
Lake Mary, FL 32746

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