

**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

<p>_____</p> <p>Accountholder Signature</p>	<p>_____</p> <p>Date</p>
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