

Date

Email Address

P. O. Box 719 **Canyon, TX** 79015 (800) 486-6888 Fax (806) 655-2490 info@goldstartrust.com

For GoldStar Asset and Money Management Accounts (GAMMA)	
The undersigned Account Holder has appointed	(Broker)
of	
(Broker/Dealer Firm) as Account Representative for the referenced self-directed GAMMA:	
GoldStar Trust Company, Custodian	
FB0	, GAMMA
P.O. Box 719 Canyon, TX 79015 Tax I.D. No. 74-2557688	(Account Registration)
Completion of this form will authorize GoldStar Trust Company ("GoldStar"), as custodian for your account, to do the following:	
 Buy, sell, deliver and/or settle trades upon the direction of your Account Representative Provide your Account Representative with unlimited internet access to your account information Provide your Account Representative with an account statement, deposit confirmations and such other information as requested from time to time. 	
I further acknowledge that:	
 I understand that Account Representative is my authorized agent and is not in any way an agent, employee, or representative of GoldStar. I understand that my Account Representative may be a registered representative of a broker dealer organization, a financial advisor or other person that I deem acceptable. I understand that GoldStar is under no duty to investigate or inquire about my Account Representative or any directions or instruction given by my Account Representative. I understand that it is solely my responsibility to direct my Account Representative to authorize and execute trades or other investments for my account, and that all instructions, directions and/or confirmations received from my Account Representative or his or her broker dealer shall be assumed by GoldStar to be authorized by me. I instruct GoldStar to make or receive payment for security or other investment transactions as indicated by broker confirmations, applications or other requests for payment as received by GoldStar from my Account Representative. I understand that I may replace my Account Representative by giving written notice to GoldStar and that removing my Account Representative will not cancel any instructions given by the Account Representative before GoldStar received written notice that a new Account Representative has been designated. I understand that if my Account Representative should leave the company or organization (also designated herein as my broker dealer), the broker dealer of record will remain on my account unless I change this designation by written notice to GoldStar. I agree to indemnify and hold GoldStar harmless for any loss or breach of any kind because GoldStar acted in reliance on instructions from me, my Account Representative, his or her agent(s) or his or her broker dealer. This agreement shall be interpreted and construed under the laws of the State of Texas, without regard to confl	
I attest by my signature below, that I understand and agree to the terms of this Trading Authorization and that I choose the person listed below as the Account Representative on my GoldStar Account.	
Signature of Primary Account Holder	Name of Account Representative
Social Security Number (primary)	Account Representative Mailing Address
Signature Joint Account Holder (if any)	Mailing Address Line 2

City

Telephone

State

Zip

GTC Rev 2017/05