



Signature Registry Changes

Account Number:	Date Received(MDY):
Account Name:	Input By:
	Verified By

Signature Type	<input type="checkbox"/> Individual "A" Type signatures, only <u>one</u> required; <input type="checkbox"/> Joint "B" Type signatures, <u>two</u> signatures are required. <input type="checkbox"/> Corporation		Unless special instructions are specified in writing, full equal Internet access will be granted to all Signers.	
For security reasons, please cross out all empty signature boxes and mark the A/B type signature boxes.				
Signer 1	Signature <div><div>A</div><div>B</div></div>	Signer 6	Signature <div><div>A</div><div>B</div></div>	
	Print Name: Date(MDY):		Print Name: Date(MDY):	
Signer 2	Signature <div><div>A</div><div>B</div></div>	Signer 7	Signature <div><div>A</div><div>B</div></div>	
	Print Name: Date(MDY):		Print Name: Date(MDY):	
Signer 3	Signature <div><div>A</div><div>B</div></div>	Signer 8	Signature <div><div>A</div><div>B</div></div>	
	Print Name: Date(MDY):		Print Name: Date(MDY):	
Signer 4	Signature <div><div>A</div><div>B</div></div>	Signer 9	Signature <div><div>A</div><div>B</div></div>	
	Print Name: Date(MDY):		Print Name: Date(MDY):	
Signer 5	Signature <div><div>A</div><div>B</div></div>	Signer 10	Signature <div><div>A</div><div>B</div></div>	
	Print Name: Date(MDY):		Print Name: Date(MDY):	
Power of Attorney (1)	Signature <div><div>A</div><div>B</div></div>	Power of Attorney (2)	Signature <div><div>A</div><div>B</div></div>	
	Print Name: Date(MDY):		Print Name: Date(MDY):	
Special Conditions				
Terms	By signing this Banking Signature Registry , we authorize StateTrust International Bank & Trust, LLC. ("STIBT") to accept instructions from any of the account signatories to open/close accounts, make fund movements, wire transfer requests and investments, apply for credit, and request services, without my further original signature. We agree to follow STIBT security procedures and to provide our signature upon request. STIBT may at any time refuse to accept such instructions. We authorize STIBT to record if deemed necessary our telephone conversations as evidence of our instructions and for service quality purposes.			