

TRUST MANAGEMENT, INC.
ACCOUNT AUTHORIZATION FORM
(This form must be dated to be valid)

ACCOUNT NAME: _____ ACCOUNT NUMBER: _____

1. Telephone Authorization

I HERE REVOKE ANY PRIOR TELEPHONE AUTHORIZATION IN FAVOR OF THE FOLLOWING ELECTION:

I authorize Trust Management, Inc. to honor telephone transaction requests from me or my Designated Representative listed above for my Account. My Social Security Number will be required as verification before any requests will be accepted. I understand and agree that Trust Management, Inc. will not be liable for any loss, expense or cost arising out of any requests effected hereunder. (NOTE: This authorization applies only to investment directions given to Trust Management, Inc.. It does not automatically authorize telephone exchange or redemption privileges for any investment.

I authorize Trust Management, Inc. to discontinue honoring telephone transactions on the above referenced account(s).

2. Payment of Annual Fees

I HEREBY REVOKE ANY PRIOR FEE PAYMENT AUTHORIZATION IN FAVOR OF THE FOLLOWING ELECTION:

Annual Trustee Fees for my IRA should be (check one box only):

Invoiced to me annually at the above address; or

Automatically withdrawn from the assets of my IRA Account. I further direct Trust Management to automatically liquidate an asset in order to pay the annual fee.

3. Change Account PIN Number:

I HEREBY DIRECT TMI TO CHANGE MY PIN NUMBER FOR ACCOUNT ACCESS WITHIN TMI'S AUTOMATED TELEPHONE SYSTEM AND WEB SITE AS FOLLOWS:

Previous PIN Number: _____

New PIN Number (4 digits only) : _____

4. Signatures

Trustee Acceptance: Trust Management, Inc.

Signature _____ By: _____

Date:(Required) _____ / _____ / _____ Date: _____

Please return form to:

Trust Management, Inc., 777 Main Street Suite 3630 Fort Worth, TX 76102