



PENSICO Advisor Advantage™ DR/AIP ASSIGNMENT

1. FIRM INFORMATION

Firm Name: _____ Tax ID#: _____
 Address: _____
 City: _____ State/Province: _____
 Country: _____ Postal Code: _____
 Contact First Name: _____ MI: _____ Last Name: _____
 Phone: _____ Type: Cell Home Business

2. DESIGNATED REPRESENTATIVE (DR)

Full access to designated accounts (please attach list of clients' names and account numbers)

Action Requested: Add Update Remove Social Security #: _____
 First Name: _____ MI: _____ Last Name: _____
 PENSICO Contact ID #: _____
 DR's Office Name: _____ DR's Broker-Dealer Name: _____
 DR's Individual CRD #: _____ DR's Firm's CRD #: _____
 DR's Representative #: _____ DR's Branch #: _____
 DR's Mailing Address: _____
 City: _____ State/Province: _____
 Country: _____ Postal Code: _____
 Business Phone: _____ Cell: _____ Fax: _____
 DR's Email Address: _____



Signature (required for add or update) Title

3. AUTHORIZED INTERESTED PARTY (AIP)

Action Requested: Add Update Remove Social Security #: _____
 Access Rights: Information only Account update (non-transactional)
 First Name: _____ MI: _____ Last Name: _____
 Address: _____
 City: _____ State/Province: _____
 Country: _____ Postal Code: _____
 Phone: _____ Type: Cell Home Business
 Fax: _____
 Email: _____ PENSICO Contact ID#: _____



Signature (required for add or update) Title

4. AUTHORIZATION

By signing below, you acknowledge that the named individuals on this form are representatives of your firm who are authorized to act on behalf of your firm with respect to those Accounts in which the client has granted your firm access using PENSICO's *Account Access Authorization* form. If designating an Authorized Interested Party (AIP), please note that an AIP will have access to client information with no transaction authority. You understand that PENSICO will rely on this information and these signatures.



Principal / Authorized Officer Signature

Date

Printed Name

INVESTMENT PRODUCTS: NOT FDIC INSURED • NO BANK GUARANTEE • MAY LOSE VALUE

Upload forms to:

www.pensico.com/upload

Fax to: 303-614-7040

Send mail to:

PENSICO
P.O. Box 173859
Denver, CO 80217-3859

For express deliveries:

PENSICO
1560 Broadway, Suite 400
Denver, CO 80202-3331

Questions?

Call 1-855-872-7540

PENSICO does not provide investment advice, does not sell investments, and does not offer tax or legal advice. PENSICO does not evaluate, recommend or endorse any advisory firm or investment. Investments are not FDIC insured and are subject to risk, including the loss of principal.