

CNB Account Number _____ **Account Name** _____

To: Community National Bank

I have separately authorized _____
as my designated representative to purchase, sell, exchange, or otherwise manage
the assets in my Community National Bank account.

I authorize Community National Bank (CNB) to pay all fee invoices related
to my CNB account received from the above-named representative or
their firm.

I understand and agree that Community National Bank has no responsibility to
verify the validity or calculation of the advisory or management fees. I
understand Community National Bank does not share in the revenue generated
by such fees.

I hereby indemnify and hold harmless Community National Bank, its
directors, officers, and employees from any and all liabilities and/or costs,
including but not limited to, reasonable attorney fees which may be
incurred by relying upon the representations of my designated
representative or their firm.

***This authorization directs Community National Bank to deduct
investment advisory/management fees from my account as instructed
by my designated representative or their firm.***

X _____
Signature of Account Owner Date

X _____
Signature of Additional Account Owner Date