

REPRESENTATIVE DESIGNATION FORM

Effective 8/2021

CN	B Account Number Ac	count Owner's Name			
1.	DESIGNATION OF REPRESEI	NTATIVE			
	hereby request that the records relating to my retirement account reflect the change of designated representative as indicated below. For joint representatives, you may use more than one line.				
	New Designated Representative Name	New Designated Representative Name			
	New Designated Representative Name	e (if joint rep)			
	New Designated Representative Name	e (if joint rep)			
2.	REPRESENTATIVE OFFICE INFORMATION				
	Office Name				
	Office Telephone Number	Of	fice Fax Number		
	Office Address				
	City	State	Zip		
	Representative ID Number	Branch Number	CRD Number		
	E-Mail Address		Office Assistant		
4.	With the designation of a new representative and/of account. Community National Bank will accept orig account, including but not limited to the purchase/se providing there are funds available in your account. Urely on the genuineness of all signatures and shall harmless from any and all claims or liabilities incurred my authorized agent and is not in any way an agent, of the new designated representative and/or secondal National Bank. Note: CNB will submit a copy of this form to the investional agreements between broker/dealers, their representative on investment company records.	or secondary representative, you have inal or facsimile written authorization ale of securities upon receipt of a trad lpon receipt of written instructions fron be under no duty to investigate any did by reason of action taken by us in go employee or representative of CNB. Try representative are the only representative of companies held within your acceptance.	from either you or your representative in re- e confirmation from the representative's firm neither you or your representative regarding in ections or investment decision. You agree to defaith pursuant to this agreement. I underst intatives authorized to execute transactions from	egard to investments in your. Timely settlement will occur nvestment directives, we may o indemnify CNB and hold us and that my representative is or my account at Community we of record. However, due to	
>	<u> </u>	X			
	Signature of Account Owner	Signature of I	Designated Representative	Date	
		XSignature of Desi	gnated Representative (if joint rep)	Date	
		X			
		Signature of Desi	gnated Representative (if joint rep)	Date	