

Date 03/01/2013

Dear J.P. Morgan Private Client Business Representative,

By signing below, I hereby grant the following Authorized Persons or individuals the authority to inquire about and receive all information relating to all my current and future JPMorgan Chase & Co. accounts, including but not limited to, balance, holdings, withdrawal, payment, deposit, and trade information. Unless I notify you otherwise, in writing, I agree these Authorized Persons or individuals may utilize websites provided by JPMorgan Chase & Co. to view information related to my account(s) and may request to be added to my accounts as a statement recipient without further consent from me.

I acknowledge JPMorgan Chase & Co. is entitled to rely on this authorization until JPMorgan Chase & Co. receives my written revocation. In order to induce JPMorgan Chase & Co. to act in accordance with this document, I agree to waive and release any claim, and hold JPMorgan Chase & Co. harmless from any loss or liability, resulting from JPMorgan Chase & Co. acting in accordance with this document until JPMorgan Chase & Co. has had reasonable time to react to written notice of revocation.

Name: RICHARD KAHN
Address: [REDACTED] City: [REDACTED] State: [REDACTED]
Zip: [REDACTED] Country: USA Home Phone: [REDACTED] Mobile Phone: [REDACTED]

For authentication purposes please provide at least two of the following:

Date of Birth: [REDACTED] SSN #: [REDACTED]
m m - d d - y y y y
City of Birth: _____ Password: _____ Mothers Maiden Name: _____
E-mail address: [REDACTED]

Name: BELLA KLEIN
Address: [REDACTED] City: [REDACTED] State: [REDACTED]
Zip: [REDACTED] Country: [REDACTED] Home Phone: [REDACTED] Mobile Phone: [REDACTED]

For authentication purposes please provide at least two of the following:

Date of Birth: [REDACTED] SSN #: [REDACTED]
m m - d d - y y y y
City of Birth: _____ Password: _____ Mothers Maiden Name: _____
E-mail address: AP@HBRKASSOCIATES.COM

⇒ [Signature] 03-07-2013 LAWRENCE VISOSKI
Client Signature Date Print Name

⇒ _____ _____ _____
Client Signature Date Print Name