



UBS Financial Services Inc.

Account Number _____

Check here if this document applies to multiple accounts.

Letter of Authorization for Duplicate Recipient of Tax Records

This letter authorizes UBS Financial Services Inc. to send a copy of your tax form for the below account(s) to the following interested party(ies). Such authorization will continue for ten years unless terminated by UBS Financial Services Inc. or until you notify UBS Financial Services Inc. in writing of your decision to terminate the mailing of your tax reports to the parties below.

Be advised that the service only pertains to your form 1099, 1099R or 1099Q. If you are eligible to receive a different tax report, this will not be sent to the below parties. Also be aware that if you are a beneficiary on an account or a participant of a qualified plan, you are not eligible to enroll the account to send duplicate tax information to a third party.

Account Number _____	Account Number _____	Account Number _____
Account Number _____	Account Number _____	Account Number _____
Account Number _____	Account Number _____	Account Number _____

Interested Party Information (may select up to four)

INTERESTED PARTY

Laura		Barooshian	
First Name	Middle Name	Last Name	
_____	_____	_____	
Address Line 1		Address Line 2	
_____		_____	
City	State	Zip	
_____	_____	_____	
Email Address		Phone	
_____		_____	



Ghislaine	Maxwell	X	X
Account Owner First Name	Last Name	Account Owner Signature	Date

0206602695

