

# Irrevocable Stock or Bond Power

*charles* SCHWAB

In order to process your transaction, please complete and sign this form to transfer your certificate(s) to Schwab for deposit into your Schwab account.

www.schwab.com  
1-800-435-4000

To endorse your securities, please sign and date this form, making sure your signatures correspond **exactly** with the names written on the face of your certificates or bonds.

## 1. Client's Information

We respect your privacy. Charles Schwab & Co., Inc. ("Schwab") will use the information you provide to open and service your account, communicate with you, and provide information about products and services. Read about Schwab's privacy policy at [www.schwab.com/privacy](http://www.schwab.com/privacy).

Name of Client (First)	(Middle)	(Last)
Account Number		

## 2. Authorization

For value received, the undersigned does (do) hereby sell, assign and transfer to Charles Schwab & Co., Inc.:

### IF STOCK, COMPLETE THIS PORTION:

\_\_\_\_\_ shares of \_\_\_\_\_ stock of \_\_\_\_\_ Corporation represented  
Number of Shares Common, Preferred, Other (Specify) Name of Company  
by certificate number(s) \_\_\_\_\_ inclusive, standing in the name of the undersigned on the books  
Certificate Number(s)  
of said Company.

### IF BOND, COMPLETE THIS PORTION:

\_\_\_\_\_ bonds of \_\_\_\_\_ in the principal amount of  
Number of Bonds Name of Company  
\$ \_\_\_\_\_, number(s) \_\_\_\_\_ inclusive, standing in the name  
Amount Certificate Number(s)  
of the undersigned on the books of said Company.

The undersigned does (do) hereby irrevocably constitute and appoint a Charles Schwab & Co., Inc. attorney to transfer the said stock or bond(s), as the case may be, on the books of said Company, with full power of substitution in the premises.

### IF MUTUAL FUND TRANSFER, COMPLETE THIS PORTION: (Attach your most recent Schwab statement.)

Name of Fund	Last Statement Balance	Date of Statement
Name(s) on the Account at the Fund	Amount Transferred (all, if transferring all shares)	
Account Number at the Fund		
Mutual Fund Distribution Option for Schwab Account (Check one.) <input type="checkbox"/> Cash Dividends/Cash Capital Gains <input type="checkbox"/> Reinvest Dividends/Reinvest Capital Gains		

## 3. Authorized Signature(s)

Signatures must correspond **exactly** with the names written on the face of certificates or bonds. Original signature(s) required.

### Signature(s) and Date(s) Required

<b>X</b> Certificate Holder Signature	Print Name as It Appears on Certificate	Date
<b>X</b> Additional Certificate Holder Signature	Print Name as It Appears on Certificate	Date

