

1 Account Information

NAME <i>(as it appears on your account application)</i>	ACCOUNT NUMBER	ACCOUNT TYPE
	ACCOUNT NUMBER	ACCOUNT TYPE
	ACCOUNT NUMBER	ACCOUNT TYPE

2 Old Information

LEGAL ADDRESS	P.O. BOX / MAILING	CITY, STATE, ZIP
DAYTIME PHONE NUMBER	FAX NUMBER	EVENING PHONE NUMBER
		EMAIL ADDRESS

3 New Information

LEGAL ADDRESS	P.O. BOX / MAILING	CITY, STATE, ZIP
DAYTIME PHONE NUMBER	FAX NUMBER	EVENING PHONE NUMBER
		EMAIL ADDRESS

4 Account Owner Signature

SIGNATURE:	DATE:
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Submission Options

SUBMIT BY FAX	SUBMIT BY EMAIL	SUBMIT BY MAIL
(866) 228-4009	PreciousMetals@TheEntrustGroup.com	Precious Metals Center 555 12th Street, Suite 900 Oakland, CA 94607