



# SIGNATURE REQUEST FORM

**MAILING ADDRESS**  
Horizon Trust Company  
P.O. Box 30007  
Albuquerque, New Mexico 87190

**FOR OVERNIGHT NIGHT MAIL ONLY:**  
Horizon Trust Company  
6301 Indian School Rd. NE, Suite 614  
Albuquerque, NM 87110

## ACCOUNT HOLDER INFORMATION

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Name : \_\_\_\_\_ Account N° : \_\_\_\_\_

Primary Contact Number : \_\_\_\_\_ Email Address : \_\_\_\_\_

## PROCESSING ELECTIONS *(choose one)*

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Normal Processing *(3-days, no charge)*

Expedited Processing *(\$50 fee, same day if received by 11am MT)*

*\*Default is Normal Processing if no election is made*

## ASSET INFORMATION

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Asset Description : \_\_\_\_\_ ARN# *(Asset Reference Number)* : \_\_\_\_\_

## DOCUMENTS FOR SIGNATURE

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I authorize the execution of the following documents listed below:

1: \_\_\_\_\_ 2: \_\_\_\_\_

Regular Mail

Overnight *(Overnight \$40 fee)*

Fax Number : \_\_\_\_\_ Email: \_\_\_\_\_

**Mail To:**

City : \_\_\_\_\_ State : \_\_\_\_\_ Zip: \_\_\_\_\_

My IRA account is self-directed and I alone am responsible for the selection, due diligence, management, review and retention of all investments in my account. I agree that the Custodian are not a "fiduciary" for my account, as the term is defined by in the Internal Revenue Code, ERISA or any other applicable federal, state or local laws. I hereby direct the Custodian, in a passive capacity, to enact this transaction for my account, in accordance with my agreement. I have read and received all pertinent information relating to the investment named herein.

Signature : \_\_\_\_\_ Date : \_\_\_\_\_

THIS FORM CAN BE FAXED,E-MAILED OR MAILED AFTER SIGNATURE.