



**Please read this important message from Revere Securities LLC's Management Team:**

In 2018 the Firm's Account Opening Documents were changed, adding a Trusted Contact Person section for your account for emergency purposes. Our regulators have required this information be requested from all of our customers in order to help protect them and ensure that should we be unable to contact you for some reason, we would be able to contact an individual that you have selected and trust.

While you are not required to provide this information, it may be a good idea to do so. By choosing to provide a trusted contact person you are authorizing that a representative of our firm be able to contact someone you trust. This person and our representative would be able to exchange and disclose limited information about your account only in certain circumstances. Such circumstances may include any of the following:

- To address possible financial exploitation;
- Confirm specifics of your current contact information;
- Identify your current health status;
- Obtain the identity of any legal guardian, executor, trustee or holder of a power of attorney.

Importantly, your "trusted contact" cannot transact business in your account. They cannot trade nor can they request funds. Additionally we will not divulge any of your personal information nor your account holdings or value.

As a second part of these standard industry regulations, Revere Securities LLC is permitted to put a temporary hold on securities and/or fund disbursements on your account when there is a reason to believe financial exploitation may be occurring. This rule specifically applies to investors age 65 or older or those individuals that the Firm reasonably believes that a mental or physical impairment would make it difficult for the investor to protect their own financial interests. In such instances we are required to investigate and, if necessary, report the financial exploitation regulators in your state of residence.

Consistent with the above, we are asking all of our clients to fill out the enclosed Trusted Contact Form from our clearing firm, INTL FC Stone and return it to your Account Executive or by mail or fax to Revere Securities' Corporate Headquarters. You may also scan and send the document via email to your Registered Representative or to [compliance@reveresecurities.com](mailto:compliance@reveresecurities.com)

Revere Securities LLC  
650 Fifth Avenue, 35<sup>th</sup> Floor  
New York, NY 10019  
Attn: Operations Dept.  
Fax: (212) 688-2454

Thank you for your attention into this important matter and thank you for your continued patronage of Revere Securities LLC.

Trusted Contact Person

Trusted Contact Person Information:

Trusted Contact Person for: Primary or Secondary

Name (Full)		Street Address	
Email	City	Country/Province	
Mobile Phone	State	Zip/Postal Code	
Home Phone	Relationship		

I agree this Contact Authorization supersedes any previous Contact Authorization Persons listed.

Acknowledgments and Signatures

By my signature below, I authorize INTL FCStone Financial Inc., and its affiliates, to communicate with my designated contact person in the event there are questions or concerns regarding my health status, including concerns about my mental capacity, including, but not limited to, concerns that I may not be able to manage my financial affairs. This authorization applies to any current or future account(s) I may maintain at INTL FCStone Financial Inc.

Specifically, I authorize INTL FCStone Financial Inc. to:

- discuss with any contact person appearing above, which individual may be an immediate family member, close personal friend, attorney, accountant or clergy, among any others that I so authorize, any concerns or observations regarding my cognitive or health related ability to make reasonable decisions about my financial affairs. Such communications will not specifically disclose any information about your INTL FCStone Financial Inc. securities account(s), investments or other personally identifiable information;
- discuss with my contact person whether any individual(s) has/have legal authority to act on my behalf; and
- communicate with any individual(s) who claim(s) to have legal authority to act on my behalf to determine whether such individual(s) have such authority.

I understand that there is no requirement that INTL FCStone Financial Inc. reach out to my contact person and that I may with-draw this Contract Authorization at any time by notifying INTL FCStone Financial Inc. in writing at the address shown on my INTL FCStone Financial Inc. account statement. By signing below, you, and your heirs, hold INTL FCStone Financial Inc. harmless if we either act, or fail to act, on your stated preferences based upon our own best judgment.

Multiple contact persons may be designated by completing additional copies of this form for each contact person.

Primary Account Holder Signature	Secondary Account Holder Signature
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Primary Account Holder Name	Date	Primary Account Holder Name	Date
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