

## 1 Account Information

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

## 2 Bank Information

BANK NAME	BANK ABA/ROUTING NUMBER
BANK ADDRESS	CITY, STATE, ZIP
RECIPIENT NAME	RECIPIENT ACCOUNT NUMBER
FOR FURTHER CREDIT TO/PAYMENT DETAILS	

## 3 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