

TRUSTEE CERTIFICATION
(To be completed by trustees)

ORIGINAL REVISED

To: Broker/Dealer- _____ Account Number _____
 _____ (Clearing
 Agent-Wedbush Securities, Inc.)

Please refer to your Trust Agreement when completing this form. Items that need to be initialed require only one Trustee's initials. Please do not white out any errors. Errors should be crossed out and corrected along with your full signature next to the correction.

TRUST INFORMATION

In consideration of your opening and/or maintaining one or more accounts for the trust named below, we, the undersigned trustees certify that the trust agreement to which this certification applies is in full force and effect and,

- The full title of the Trust to which this Certification applies is (Example: Jack Smith and Joan Smith trustees for the benefit of John Smith):

- This Trust is: Revocable Irrevocable Testamentary
- The date of the governing Trust or Will is _____ The date of the latest Trust Amendment is _____
- The names of the successor trustees, if any, are: _____
- The Settlers/Grantors/Makers of the Trust are: _____
- The beneficiaries of the Trust are: _____

AUTHORIZATIONS

- Investment Authorization.** You are authorized by the terms of the Trust document and applicable law to accept investment decisions from: PLEASE INITIAL YES TO ONLY ONE
 Any one of the individuals named in item 13 of this certification: Yes _____ No _____
 A majority of the trustees listed under item 13 jointly: Yes _____ No _____
 Only upon instructions from each and every trustee listed under item 13: Yes _____ No _____
- You are authorized to accept instructions with respect to any activity relating to the account: PLEASE INITIAL YES TO ONLY ONE
 Upon written instructions relative to the trust account from any one of the trustees listed in item 13: Yes _____ No _____
 Upon written instructions relative to the trust account from a majority of the trustees listed in item 13: Yes _____ No _____
 Upon written instructions relative to the trust account only upon instructions from each and every trustee named under item 13: Yes _____ No _____

We, the Trustees, understand that you, as the broker/dealer and/or your clearing agent reserve the right to require the joint action of all trustees with respect to any activity relating to the trust account.

- Margin Transactions (a Margin Agreement must be executed separately)** PLEASE INITIAL
 The Trust is authorized to open and maintain a margin account, to borrow against the loan value of the marginable securities in its account, to pledge securities as collateral, and to lend such securities: Yes _____ No _____

- We, the Trustees, jointly and severally, indemnify you, the broker/dealer and the clearing agent, and hold you or it harmless from any and all claims, liabilities and expenses which may arise from your accepting instructions (including instructions related to investments, withdrawals, distributions and transfers) given by the trustee(s) listed in item 13 below. This indemnification shall survive the termination of either the Trust or the account.
- The Trust has not been revoked, modified, or amended in any manner that would cause the representations contained herein to be incorrect. We agree to promptly inform you, in writing, of any amendment to the Trust, any change in the composition of the trustees, or any other event which could alter the representations made herein. You may rely on this certification until you receive written notice to the contrary signed by all of the then current trustees.

- Investment Powers.** We certify that we have the power under the trust agreement and applicable law to enter into transactions, both purchases and sales, of the type(s) indicated below. Please indicate which types of investments are permitted (PLEASE INITIAL YES OR NO TO ALL CATEGORIES):

Yes	No	Yes	No	Yes	No
___	___	___	___	___	___
U.S. Government Securities		Municipal Securities		Corporate Stocks	
___	___	___	___	___	___
U.S. Agency Securities		Mutual Funds		Annuities	
___	___	___	___	___	___
Corporate Bonds		Unit Investment Trusts		Limited Partnerships	
___	___	___	___	___	___
Short Sales of Securities other than Options		Other (Specify) _____			

OPTION TRANSACTIONS (INITIAL YES OR NO TO ALL CATEGORIES)

___ Covered Option Writing ___ Uncovered Option Writing ___ Buying Options
 ___ Spreads/Straddles

TRUSTEES

- We hereby certify that the undersigned are all of the Trustees. The undersigned warrant that they have the authority to open this account to deposit and withdraw assets from this account and to execute this certification.

Trustee Names (Print)	Signatures	Addresses
_____	_____	_____
_____	_____	_____
_____	_____	_____

ALL TRUSTEES MUST SIGN. ATTACH EXTRA PAGE IF NECESSARY
 REVIEWED AND APPROVED BY AND SIGNATURE GUARANTEED BY:

 (For Broker/Dealer Use Only)