

**J.P. Morgan Securities LLC**  
Member FINRA and SIPC

You can submit this form and any attachments by

**Mail**

J.P. Morgan Securities LLC  
Attn: Physical Securities  
Processing Department  
Mail Code: NY1-C060  
3rd Floor East  
4 Chase Metrotech Center  
Brooklyn, NY 11245-0001

**Use this form to**

- Authorize the transfer of ownership to another party when depositing a security certificate into a J.P. Morgan Securities LLC (**JPMS**) account. For example, use this form to deposit a certificate that is registered in one person's name into an account that has two account holders.
- Deposit a stock certificate where the certificate registration does not match the registration of the brokerage account.
- Deposit a stock certificate into an account belonging to a third party.
- Deposit a stock certificate when there are minor spelling differences between your brokerage account and the certificate's registration.

**What you need to know**

- This form is required if the registration on the account and the certificate are not the same.
- You will need to provide JPMS with the original version of the form. If a copy of this form is received, your request will not be processed.
- This form must be signed by all parties listed on the certificate. If more than two signatures are needed, please print and provide an additional signature page.
- This form must be received by JPMS within 30 calendar days of the date this form is signed.
- This form must be notarized.
- For your protection, we may call you at the number on file for your account to confirm this transaction before we process it.
- For best results, complete this form using Adobe Reader. You will need to print a paper copy for your signature.
- **Additional documentation is required.** Please submit a *Physical Certificate Deposit Receipt* form and the security certificate along with this form. The *Deposit Receipt* form provides a list of additional documents that may also be required. Only original documents will be accepted.

**1. Tell Us About the Receiving Account**

<input type="text"/>	<input type="text"/>
Account Holder Name	Account Number

**2. Tell Us About the Certificate Being Deposited**

<input type="text"/>	<input type="text"/>
Certificate Registration	Certificate Owner's Social Security Number or Tax ID Number
<input type="text"/>	<input type="text"/>
Name of Company that Issued the Certificate	Number of Shares Being Deposited

**INVESTMENT AND INSURANCE PRODUCTS:**  
• NOT A DEPOSIT • NOT FDIC INSURED • NOT INSURED BY ANY FEDERAL GOVERNMENT AGENCY  
• NO BANK GUARANTEE • MAY LOSE VALUE

### 3. Certificate Owner Signature(s)

I/We, whose signature(s) appear below, deliver herewith to JPMS the above-named Certificate duly endorsed on the back or on a signed Stock/Bond Power, and authorize JPMS to place the securities evidenced by the Certificate in the brokerage account listed above. JPMS may henceforth, for all purposes whatsoever, treat the recipient (Account Holder) as the absolute owner of said securities and all proceeds resulting from them. I/We intend this to be a full release of all claims of ownership I/we might have to the securities, in favor of the recipient. JPMS shall not be responsible to me/us in any way for the profits, proceeds or use thereof, and I/ we agree to indemnify JPMS and hold JPMS harmless from any loss and/or liability in connection therewith.

\_\_\_\_\_  
Certificate Holder Signature

\_\_\_\_\_  
Date (month/day/year)

\_\_\_\_\_  
Additional Certificate Holder Signature (as applicable)

\_\_\_\_\_  
Date (month/day/year)

### 4. Certificate Holder Notary

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy or validity of that document.

STATE OF _____ ) COUNTY OF _____ ) Subscribed, sworn to and acknowledged before me by _____ Name of Document Signer (above) this _____ day of _____ , _____ Day Month Year _____ Signature of Notary Public	SS: _____          My commission expires _____	Place Stamp Here
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### 5. Additional Certificate Holder Notary (as applicable)

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy or validity of that document.

STATE OF _____ ) COUNTY OF _____ ) Subscribed, sworn to and acknowledged before me by _____ Name of Document Signer (above) this _____ day of _____ , _____ Day Month Year _____ Signature of Notary Public	SS: _____          My commission expires _____	Place Stamp Here
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\_\_\_\_\_  
Your Name

\_\_\_\_\_  
Your Account Number