

Date: _____

To Whom It May Concern:

This is your authorization to accept check number _____, dated _____, in the amount of \$ _____,
(mm/dd/yyyy)
for credit to the account of:

Name (First) (Middle) (Last)

Account Number _____

I agree to hold Charles Schwab & Co., Inc. harmless from any loss of claim which you may incur by reason of your acceptance of my funds for credit to the above account.

▶ Signature: Payee _____ Print Name _____ Date _____
(mm/dd/yyyy)

▶ Signature: Additional Payee _____ Print Name _____ Date _____
(mm/dd/yyyy)

<p>State of _____, County of _____</p> <p>On _____ before me, _____, (mm/dd/yyyy) (Name and Title of the Notarizing Officer)</p> <p>personally appeared _____, (Name of Person[s] Signing Instrument)</p> <p>who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.*</p> <p>I certify under PENALTY OF PERJURY under the laws of the State of _____ that the foregoing paragraph is true and correct.</p> <p>WITNESS my hand and official seal.</p> <p>Notary Public _____ Expiration Date _____ (Signature of Notarizing Officer) (mm/dd/yyyy)</p> <p>*Notaries outside of California may attach the appropriate notarizing declaration in lieu of the above.</p>	<p>(NOTARY SEAL)</p>
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