Fortune Securities, Inc.
388 E. Valley Blvd., Suite 208
Alhambra, CA 91801
(626) 281-6001

Rep ID: _____ Account No. _____

Trusted Contact Person Information

This voluntary form reflects new FINRA Rule 2165 (Financial Exploitation of Specified Adults) and amendments to FINRA Rule 4512 (Customer Account Information) relating to financial exploitation of seniors.

By choosing to provide information about a trusted contact person, you authorize us to contact the trusted contact person listed below and disclose information about your account to that person in the following circumstances: to address possible financial exploitation, to confirm the specifics of your current contact information, health status, or the identity of any legal guardian, executor, trustee or holder of a power of attorney, or as otherwise permitted by FINRA Rule 2165 (Financial Exploitation of Specified Adults).

☐ Mr. ☐ Mrs. ☐ Ms. ☐ Dr. **Suffix** ☐ Sr. ☐ Jr.

First Name | Middle Name | Last Name

Address | Apt/Suite No.

City | State | ZIP Code | Country

Work Phone | Home Phone | Mobile Phone | Email Address

Relationship to Primary Applicant/Co-Applicant: _____

Signatures

Primary Applicant Name (please print)

Primary Applicant Signature | Date

Co-Applicant Name (please print)

Co-Applicant Signature | Date

Firm Approval

Financial Advisor Signature | Date

Firm Principal Signature | Date