

(Letterhead)

(Date)

State of Alaska
Department of Commerce, Community, and Economic Development
Division of Banking and Securities
550 West 7th Avenue, Suite 1850
Anchorage, AK 99501
(securities@alaska.gov)

Attn: Securities Section

Re: Dual Registration for (Individual name, CRD number)

Dear Alaska Division of Banking and Securities:

We are writing to request dual registration for the following representative (Individual name & CRD number) under Alaska Regulation 3 AAC 08.010.

We respectfully request dual registration so that this individual can support operational functions that cross between affiliates.

(Firm name, CRD number) consents to dual registration of the above named individual and each assumes joint liability with (Firm name CRD number), for any act or omission of the individual in violation of Alaska securities laws or regulations during the period of the registration.

The undersigned, declare that each occupies the official position indicated on this form and is authorized to sign this document on behalf of the firm.

Authorized Signature
Title/Company

Authorized Signature
Title/Company