Hilltop Securities, Inc.
RIA CLEARING –ELECTION FORM

Plan or Client Name: ______________________ **Account No(s).:** ______________________

SS No./Tax ID No.: ______________________ ______________________

Address: ______________________ ______________________

______________________ ______________________

Advisor Name: ______________________ **Person ID:** ______________________

Advisor Phone No.: ______________________ **Office No.:** ______________________

SABIL Login: ______________________ **Person ID to Pay:** ______________________

E-mail Address: ______________________

SERVICES REQUESTED (✓ *selections*): PLEASE CHECK THE SCHEDULE AND SERVICE REQUESTED

- ❑ **Performance Reports** - Be sure to complete a Cost Basis Tally Sheet for each of the account's current positions (i.e., total cost & purchase date for each tax lot). The Investment Management Group (IMG) does not provide cost basis existing positions.
- ❑ **Online Client Access –** If your client has a MyView login ID and would like to view their monthly reports online, please provide us with the login ID. ________________ *Note: For MyView information and login IDs please contact your relationship manager.*
- ❑ **Advisory Fee Billing** - IMG can provide advisory fee billing to your clients on your behalf. In order to provide this service, IMG requires an LOA or other client authorization. **Important: IMG will not process advisory fees without the customer approval.** Please indicate the agreed upon **annual** rate at which the client will be billed. Please select one of the following choices below:
  - ❑ Flat Rate _______%
  - ❑ Fee Schedule Attached

(All accounts are billed the 1st month of each quarter based on the previous quarter end market value.)

Please note it takes a full 30 days on our performance reporting system to generate accurate performance. The first reports will be produced at the end of the month in which this 30-day period ends.

The reports are updated to SABIL and MyView by the 10th business day of each month.

Advisor Signature: ____

Branch Manager Signature: ____

Date: ____

Investment Management Group
(214) 859-6735
(214) 859-5639 Fax