

▶ Upon signing, I am stating that I have read and understand the Terms and Conditions set forth by the program Offer Letter.

Third Party Payment Release

Complete This Section If Rebate Check Will Be Made Payable To Trade Ally

I authorize the payment of the incentive to the third party named below, and I understand that I will not be receiving the incentive payment. I also understand that my release of the payment to a third party does not exempt me from the program requirements outlined in the Incentive Catalog, Final Application Agreement and Terms and Conditions.

Authorized By:

Customer Name:

Signature:

Date:

Check should be made payable to:

Individual/Company Name*:

Phone:

Mailing Address:

City:

State:

ZIP:

Tax Status:** Individual/Sole Proprietor/
Single-Member LLC C Corporation Partnership LLC: Enter Tax Classification _____
 S Corporation Trust/Estate Other _____

Tax ID Number Please provide your EIN/Federal Tax ID below.

EIN/Federal Tax ID -

Exemptions

Payee Code _____ FATCA Code _____

▶ Please note that this document will require re-saving each time a digital signature is used.

* Company name as it appears on Trade Ally's W-9.

** W-9 must be provided for payee with application.