

Sole Proprietorship Certification



Return Options:
Electronically via Message Center:

Log in and go to Client Services > Message Center to attach the file

Regular Mail:
PO Box 2760, Omaha, NE 68103-2760

Overnight Mail:
200 South 108th Avenue
Omaha, NE 68154-2631

Fax: 866-468-6268

Account Number:

Tax ID:

To: TD Ameritrade Clearing, Inc.

I, *(Proprietor: First, Middle Initial, Last, Suffix):* _____, hereby certify

that I am engaged in business under the assumed name and style of *(Entity):* _____

(Tax ID): _____ at the following address:

Street Address:

City: _____ State: _____ Zip Code: _____ Country: _____

I am the sole proprietor of the business so conducted, and no other person, partnership, or corporation has any ownership interest therein.

All securities and other property in the name of *(Entity):* _____ are owned solely by me.

Original signatures required, electronic signatures and/or signature fonts are not authorized.

Signature of Sole Proprietor: _____ Date: _____
Sign Here X

Printed Name of Sole Proprietor *(First, Middle Initial, Last, Suffix):* _____

Printed Name of Assumed Name/Entity: _____

Investment Products: Not FDIC Insured * No Bank Guarantee * May Lose Value

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