



**Southwest Securities, Inc. and/or Broker/Dealers for which it clears**  
Southwest Securities, Inc. Member NYSE/NASD/SIPC

**Power of Attorney Agreement**

Use this form to establish Power of Attorney.

**1. Power of Attorney Agreement.**

The undersigned hereby authorizes \_\_\_\_\_, (whose signature appears below) as his/her agent and attorney in fact to buy, sell (including short sales) and trade in stocks, bonds, put and call options and any other securities and/or contracts relating to the same on margin or otherwise in accordance with your terms and conditions for the undersigned's account and risk and in the undersigned's name, or number on your books. The undersigned hereby agrees to indemnify and hold you harmless from and to pay you promptly on demand any and all losses arising therefrom or debit balance due thereon.

You are authorized to follow the instructions of in every respect concerning the undersigned's account with you, and he/she is authorized to act for the undersigned and in the undersigned's behalf in the same manner and with the same force and effect as the undersigned might or could do with respect to such purchases, sales or trades as well as with respect to all other things necessary or incidental to the furtherance or conduct of such, purchases, sales or trades.

The undersigned hereby ratifies and confirms any and all transactions with you heretofore or hereafter made by the aforesaid agent or for the undersigned's account.

This authorization and indemnity is in addition to (and in no way limits or restricts) any rights which you may have under any other agreement or agreements between the undersigned and your firm.

This authorization and indemnity is also a continuing one and shall remain in full force and effect until revoked by the undersigned by a written notice addressed to you and delivered to your office at 1201 Elm Street, Suite 3500, Dallas, TX 75270, but such revocation shall not affect any liability in any way resulting from transactions initiated prior to such revocation. This authorization and indemnity shall insure to the benefit of your present firm and of any successor firm or firms irrespective of any change or changes at any time in the personnel thereof, for any cause whatsoever, and of the assigns of your present firm or any successor firm.

**2. Authorized Agent Signature.**

_____ Authorized Agent Printed Name	<b>X</b> _____ Authorized Agent Signature	_____ Date
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**3. Customer Signature.**

_____ Customer Account Number	<b>X</b> _____ Customer Signature	_____ Date
_____ Customer Printed Name		