CHANDLER ASSET MANAGEMENT

Date Completed:

Account Preferences Form

Client Information

Account Name

Address **City** **State** **Zip**

Primary Contact **Title** **Telephone/Fax** **Email**

Alternative Contact **Title** **Telephone/Fax** **Email**

Custodian Information

Custodian Bank **Client Account #**

Address **City** **State** **Zip**

Primary Contact **Telephone** **Fax**

Email

Has the custodian been notified about our involvement in the management of this account? ❑ Yes ❑ No

Chandler Client Portal Access

This includes password-protected access to Monthly Statements and Trade Tickets.

Name **Title** **Email**

Name **Title** **Email**

Name **Title** **Email**

Name **Title** **Email**

Duplicate Confirmations (Optional)

Individuals below will receive duplicate confirms from the executing broker.

Name **Fax/Email**

Name **Fax/Email**

Accounting Information

Fiscal Year Ends:

Lot Selection:
❑ Avg. Cost (Default) ❑ FIFO ❑ LIFO ❑ Other:

Accounting Methodology: Other **Specify Other:**

Billing Information

Fees paid from custodial account (specified in Agreement)? ❑ Yes ❑ No

❑ Email Preferred **Email**

❑ Mailed Preferred **Billing/Duplicate Address**

Attention **City** **State** **Zip**