



Your MONEY...Your WAY

### COMMISSION CHANGE FORM

#### PERSONAL INFORMATION

Customer Name:

Account Number:  IB Name (if any):

Telephone:  Fax:

#### COMMISSION INFORMATION

Current Commission:

New Commission:

Effective Date:

The undersigned hereby authorize(s) 4exHouse to change the commission for the account listed above to the new commission requested by this form.

CLIENT	INTRODUCING BROKER
<input type="text"/> (PRINT CUSTOMER NAME)	<input type="text"/> (PRINT INTRODUCING BROKER NAME)
<input type="text"/> (SIGNATURE)	<input type="text"/> (SIGNATURE)
<input type="text"/> (DATE)	<input type="text"/> (DATE)