OMB APPROVAL

OMB Number: 3235-0681 Expires: October 31, 2026 Estimated average burden hours per initial response...........1.0

FORM MA-NR

DESIGNATION OF U.S. AGENT FOR SERVICE OF PROCESS FOR NON-RESIDENTS

Please read the General Instructions for this form and other forms in the MA series, as well as its subsection, "General Instructions to Form MA-NR," before completing this form. All *italicized* terms herein are defined or described in the Glossary of Terms appended to the General Instructions.

Purpose: Each *non-resident municipal advisor*, *non-resident* general partner or *non-resident managing agent* of a *municipal advisor*, and *non-resident* natural person who is a person associated with the *municipal advisor* and engaged in *municipal advisory activities* on its behalf must execute a written irrevocable consent and power of attorney on Form MA-NR to appoint an agent in the United States, upon whom may be served any process, pleadings, or other papers in any action brought against such *non-resident municipal advisor*, general partner, *managing agent* or natural person associated with the *municipal advisor*.

Instructions to Complete this Form:

- 1. This power of attorney, consent, stipulation, and agreement shall be signed and notarized by the *non-resident municipal advisor*, *non-resident* general partner or *managing agent*, or *non-resident* natural person who is a person associated with the *municipal advisor* and engaged in *municipal advisory activities* on its behalf, as applicable, in Section A of Form MA-NR. The form must be signed by the authorized agent for service of process in the United States in Section B of Form MA-NR.
- 2. The name of each *person* who signs this Form MA-NR must be typed or printed beneath the *person's* signature.
- 3. Any *person* who occupies more than one of the specified positions must indicate each capacity in which the *person* is signing the form.
- 4. Section C Documentation: If any *person* signs this form pursuant to a written authorization -e.g., a board resolution or power of attorney an accurate and complete copy of each such document must be included with the Form MA-NR.
- 5. Attachment to Form MA or Form MA-I:
 - a) Complete and execute a printed Form MA-NR, including signatures and notarization. Then scan the original completed and executed form to create a PDF file. Please consult the instructions for uploading PDF files into EDGAR, found in the EDGAR Filer's Manual, available at http://www.sec.gov/info/edgar.shtml.
 - b) If any other documents are required, as specified in Section C of the form, include these documents in the same PDF file or create a separate one(s).
 - c) Attach the PDF file(s) to the Form MA or Form MA-I, as appropriate, where prompted in the form.

Power of Attorney, Consent, Stipulation, and Agreement

A. Designation and Appointment of Agent for Service of Process

Identify the agent for service of process for the *non-resident municipal advisor*, for the *non-resident* general partner or *managing agent* of a *municipal advisor*, or for the *non-resident* natural person associated with the *municipal advisor* and engaged in *municipal advisory activities* on its behalf. Fill in all lines.

Enter all the letters	1	nated and appointed as agent for service of process. not initials or other abbreviations. line.)	
(name)			
_	of United States pe Box. Do not use a f	rson designated and appointed as agent for service of Coreign address.	f process
(number and stree	et; office suite or r	oom number)	
(city)	(state)	(U.S. postal code: zip+4)	
(area code) (telep	phone number)		

By signing this Form MA-NR or authorizing the signatory below to sign on your behalf, you – the *non-resident municipal advisor*, *non-resident* general partner or *non-resident managing agent* of a *municipal advisor*, or *non-resident* natural person who is a person associated with the *municipal advisor* and engaged in *municipal advisory activities* on its behalf (hereinafter, "the Designator") – irrevocably designate and appoint the above United States *person* as your Agent for Service of Process, and agree that such *person* may be served on your behalf, of any process, pleadings, subpoenas, or other papers, and you further agree that such service may be made by registered or certified mail, in:

- (a) any investigation or administrative proceeding conducted by the Commission (i) that relates to you or (as applicable) to the municipal advisor of which you are a general partner or managing agent, or with which you are associated and on whose behalf you are engaged in municipal advisory activities or (ii) with respect to which you may have information; and
- (b) any civil suit or action brought against you or (as applicable) the *municipal advisor* of which you are a general partner or *managing agent*, or with which you are associated and on whose behalf you are engaged in *municipal advisory activities* or to which you, or (as applicable) the *municipal advisor* of which you are a general partner or *managing agent*, or with which you are associated and on whose behalf you are engaged in *municipal advisory activities* has been joined as defendant or respondent, in any appropriate court in any place subject to the jurisdiction of any state, or of the United States or of any of its territories or possessions or of the District of Columbia, where the *investigation*, *proceeding*, or cause of action arises out of or relates to or concerns *municipal advisory activities* of the *municipal advisor*.

The Designator stipulates and agrees that: any such civil suit or action or administrative *proceeding* may be commenced by the service of process upon, and that service of an administrative subpoena shall be effected by service upon, the above-named Agent for Service of Process; and that service as aforesaid shall be taken and held in all courts and administrative tribunals to be valid and binding as if personal service thereof had been made. Such person cannot be a *Commission* member, official, or employee.

Appointment and Consent: Effect on Partnerships. If you are organized as a partnership, this irrevocable power of attorney and consent to service of process will continue in effect if any partner withdraws from or is admitted to the partnership, provided that the admission or withdrawal does not create a new partnership. If the partnership dissolves, this irrevocable power of attorney and consent shall be in effect for any action brought against you or any of your former partners.

Certification:

The undersigned certifies under penalty of perjury under the laws of the United States of America, that the information contained in this Form MA-NR is true and correct and that this Form MA-NR is signed as a free and voluntary act.

Unless the Designator is a natural person signing on his or her own behalf, the undersigned further certifies that the Designator has duly caused this power of attorney, consent, stipulation, and agreement to be signed on the Designator's behalf by the undersigned, thereunto duly authorized:

Signature of Designator or Person Signing on Behalf of Designator:

	Date:
Printed Name:	Title:
In the City of:	In the Country of:
The Designator is executing this Form (<i>Check all that apply</i> .)	MA-NR as a:
municipal advisory activities on Non-resident municipal advisors Non-resident general partner of a Name of municipal advisor Non-resident managing agent of	is a person associated with the <i>municipal advisor</i> and engaged in its behalf sole proprietor a municipal advisor
The Designator is executing this Form (Check all that apply.)	MA-NR in connection with a(n):
	the Designator for registration as a <i>municipal advisor</i> the <i>municipal advisor</i> of which the Designator is a general partner
	filed regarding a natural person who is a person associated with the municipal advisory activities on its behalf

Mailing Ad	dress of the Designa		evious Form MA-NR	
Do not use a	P.O. Box.			
(number and	d street)			_
(city)	(state/region)	(country)	(postal code)	-
(country co	de) (area code) (tele	phone number)	_	
For a teleph	one number outside	of the U.S., pro	vide the country code with the area co	ode and number.
EDGAR CI	K No. (if any)	<i>SEC</i> F	File No. (if any):	
Signature: _			[PLACE SEAL HERE]	
Subscribed	and sworn to me thi	s day of	,	
	sion expires on		County of	
. Acceptance	e of the Above De	signation and	Appointment as Agent for Servi	ce of Process.
this designa MA-NR. B agency for s	tion and appointment y signing below, the service of process has	nt as agent for se e signatory certif as duly caused th	A above as the agent for service of process, under the terms set it is that the <i>person</i> identified in Section power of attorney, consent, stipula ereunto duly authorized:	forth in this Form on A above as the
Signature of	f U.S. Agent for Ser	vice of Process:		
			Date:	-
Printed Nan	ne:		Title:	-
. Attached D	Oocuments			
1. Is any narattorney	-	rsuant to a writte	en authorization, such as a board resol	lution or power of
		-	her written document evidencing the of for service of process and/or the age	-

If "Yes" to Section C-1 and/or Section C-2., identify each such document on a separate line include an accurate and complete copy of each such document as part of the PDF file in which a separate line in the PDF file in which a separate line in the PDF file in which a separate line in the PDF file in which a separate line in the PDF file in which a separate line in the PDF file in which a separate line in the PDF file in which a separate line in the PDF file in which a separate line in the PDF file in which a separate line in the PDF file in which a separate line in the PDF file in which a separate line in the PDF file in which a separate line in the PDF file in which a separate line in the PDF file in which a separate line in the PDF file in which a separate line in the PDF file in which a separate line in the PDF file in which a separate line in the PDF file in which a separate line in the PDF file in the PDF file in which a separate line in the PDF file in	ich the Form
MA-NR is attached to the Form MA or Form MA-I, or attach each such document as a sepa the relevant Form MA or Form MA-I.	rate PDF to
the relevant Porni WA of Porni WA-1.	