

# LINE OF CREDIT APPLICATION

## 1 JOINT INTENT

Any person, whether married, or single, may apply for separate credit. If this is an application for joint credit, please initial here:

The undersigned intend to apply for joint credit:

Applicant      Applicant      Applicant      Applicant      Applicant      Applicant

## 2 APPLICANT INFORMATION

### Applicant

Applicant Name (First, MI, Last) /Name of Trust<sup>1</sup>

Name of Trustee (if Applicant is a Trust)

Principal Residence Address (Street) (PO Box not accepted)

Principal Residence Address (City, State, ZIP, Country)

Provide one: Cell Phone<sup>2</sup>      Home Phone      Business Phone

Email Address      Date Of Birth (mm/dd/yyyy)

Country of Citizenship<sup>3</sup>      Social Security Number

Form of Identification:

☐ Drivers License    ☐ Passport    ☐ Government-Issued Photo ID

ID Number      State/Issuing Authority

Issue Date      Expiration Date (mm/dd/yyyy)

Industry/Occupation

Employer

Annual Income<sup>4</sup>:

☐ Less Than \$50,000    ☐ \$50,001-\$100,000    ☐ \$100,001-\$250,000  
☐ \$250,001-\$500,000    ☐ \$500,001-\$1,000,000    ☐ Greater Than \$1mil

Check One:    ☐ Married    ☐ Separated    ☐ Unmarried

### Co-applicant

Co-applicant Name (First, MI, Last) /Name of Trust<sup>1</sup>

Name of Trustee (if Applicant is a Trust)

Principal Residence Address (Street) (PO Box not accepted)

Principal Residence Address (City, State, ZIP, Country)

Provide one: Cell Phone<sup>2</sup>      Home Phone      Business Phone

Email Address      Date Of Birth (mm/dd/yyyy)

Country of Citizenship<sup>3</sup>      Social Security Number

Form of Identification:

☐ Drivers License    ☐ Passport    ☐ Government-Issued Photo ID

ID Number      State/Issuing Authority

Issue Date      Expiration Date (mm/dd/yyyy)

Industry/Occupation

Employer

Annual Income<sup>4</sup>:

☐ Less Than \$50,000    ☐ \$50,001-\$100,000    ☐ \$100,001-\$250,000  
☐ \$250,001-\$500,000    ☐ \$500,001-\$1,000,000    ☐ Greater Than \$1mil

Check One:    ☐ Married    ☐ Separated    ☐ Unmarried

1. Unless the context states otherwise, the term "Applicant" includes all Applicants. Each Applicant, individually and collectively, may also be referred to herein as "I", "me", "you", or words of similar import. Eligible applicants include individuals and certain revocable trusts.
2. Supernova may contact you at any phone number you provide. When you give Supernova your cell phone number, Supernova has your consent to contact you at that number about your line of credit. Message and data rates may apply. You may contact Supernova at any time to change these preferences.
3. Each Applicant must be a permanent resident of the United States.
4. You do not have to include information about income from alimony, child support, or separate maintenance payments, unless you want Supernova to consider this income in connection with this application for credit.

2

## APPLICANT INFORMATION - CONTINUED

### Co-applicant

Applicant Name (First, MI, Last) /Name of Trust<sup>1</sup>

Name of Trustee (if Applicant is a Trust)

Principal Residence Address (Street) (PO Box not accepted)

Principal Residence Address (City, State, ZIP, Country)

Provide one: Cell Phone<sup>2</sup> Home Phone Business Phone

Email Address Date Of Birth (mm/dd/yyyy)

Country of Citizenship<sup>3</sup> Social Security Number

Form of Identification:

☐ Drivers License ☐ Passport ☐ Government-Issued Photo ID

ID Number State/Issuing Authority

Issue Date Expiration Date (mm/dd/yyyy)

Industry/Occupation

Employer

Annual Income<sup>4</sup>:

☐ Less Than \$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$250,000  
☐ \$250,001-\$500,000 ☐ \$500,001-\$1,000,000 ☐ Greater Than \$1mil

Check One: ☐ Married ☐ Separated ☐ Unmarried

### Co-applicant

Co-applicant Name (First, MI, Last) /Name of Trust<sup>1</sup>

Name of Trustee (if Applicant is a Trust)

Principal Residence Address (Street) (PO Box not accepted)

Principal Residence Address (City, State, ZIP, Country)

Provide one: Cell Phone<sup>2</sup> Home Phone Business Phone

Email Address Date Of Birth (mm/dd/yyyy)

Country of Citizenship<sup>3</sup> Social Security Number

Form of Identification:

☐ Drivers License ☐ Passport ☐ Government-Issued Photo ID

ID Number State/Issuing Authority

Issue Date Expiration Date (mm/dd/yyyy)

Industry/Occupation

Employer

Annual Income<sup>4</sup>:

☐ Less Than \$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$250,000  
☐ \$250,001-\$500,000 ☐ \$500,001-\$1,000,000 ☐ Greater Than \$1mil

Check One: ☐ Married ☐ Separated ☐ Unmarried

1. Unless the context states otherwise, the term "Applicant" includes all Applicants. Each Applicant, individually and collectively, may also be referred to herein as "I", "me", "you", or words of similar import. Eligible applicants include individuals and certain revocable trusts.
2. Supernova may contact you at any phone number you provide. When you give Supernova your cell phone number, Supernova has your consent to contact you at that number about your line of credit. Message and data rates may apply. You may contact Supernova at any time to change these preferences.
3. Each Applicant must be a permanent resident of the United States.
4. You do not have to include information about income from alimony, child support, or separate maintenance payments, unless you want Supernova to consider this income in connection with this application for credit.

## 2 APPLICANT INFORMATION - CONTINUED

### Background Information

How long have you been a client of your Investment Advisor (as defined in Section 8)? ☐ <1 Year ☐ 1 to 4 years ☐ 5 to 9 years ☐ 10 years+

Please provide an estimate of your net worth:

☐ Less than \$100,000 ☐ \$100,001-\$250,000 ☐ \$250,001-\$500,000 ☐ \$500,001-\$1,000,000 ☐ \$1,000,001-\$5,000,000 ☐ Greater than \$5 mil

## 3 LINE OF CREDIT REQUEST INFORMATION

Your line of credit may be used for personal or business purposes, but cannot and each Applicant, by its signature below acknowledges will not, be used to purchase or carry margin stock or to refinance existing debt that was used to purchase or carry margin stock. The term "margin stock" includes principally (1) stocks that are registered on a national securities exchange or any over-the-counter security designated for trading in the National Market System, (2) debt securities (bonds) that are convertible into margin stock, and (3) shares of most mutual funds. As a condition of credit approval, you will be required to sign a Form FR G-3 certifying that you will not use the line of credit proceeds for such purposes.

*If Applicant is an Individual, please initial here:*

Applicant Applicant Applicant Applicant Applicant Applicant

*If Applicant is a Trust, please initial here:*

Name of Trust Trustee Trustee Trustee

Name of Trust Trustee Trustee Trustee

Requested Amount \$ OR ☐ Maximum amount available based on Collateral Accounts

Primary Purpose for the line of credit (select one):

☐ Personal Property (such as automobile, boat, jewelry) ☐ Tax Payments ☐ Real Estate ☐ General Liquidity Purposes ☐ Others

If you've chosen Others, please describe:

Are all or any funds going to pay off existing securities-based loans or lines of credit? ☐ Yes ☐ No If yes: Approximate payoff amount \$

Name of Lender: Phone Number:

## 4 DECLARATIONS

Do any of the items below apply to you? (Please check) ☐ Yes ☐ No

If yes, please describe:

("You" refers to each Applicant)

1. Are there any outstanding judgments against you?
2. Have you declared bankruptcy in the past 7 years?
3. Have you directly or indirectly been obligated on any loan which has resulted in foreclosure or judgment?
4. Are you presently delinquent or in default on any federal debt or any other loan, mortgage, financial obligation, bond, or loan guarantee?
5. Are you a party to a lawsuit?

## 5 POLITICALLY EXPOSED FOREIGN OR DOMESTIC PERSON, OR INTERNATIONAL ORGANIZATION POLITICALLY EXPOSED PERSON

Please review the definitions below. Do you qualify as a Politically Exposed Foreign Person, a Politically Exposed Domestic Person, or an International Organization politically exposed person? ("You" refers to any Applicant(s)) ☐ Yes ☐ No

If yes, please describe:

**Politically Exposed Foreign Person**, also referred to as a Senior Foreign Political Figure in U.S. regulation, means a current or former:

- Senior official in the executive, legislative, administrative, military, or judicial branches of a foreign government (whether elected or not);
- Senior official of a major foreign political party;
- Senior executive of a foreign government-owned commercial enterprise;
- A corporation, business, or other entity that has been formed by, or for the benefit of, any such individual;
- An immediate family member (including spouses, parents, siblings, children, and a spouse's parents and siblings) of any such individual; or
- A person who is widely and publicly known (or is actually known by Supernova) to be a close associate of such individual.

**Politically Exposed Domestic Persons ("PEDPs")** are individuals who are or have been entrusted domestically with prominent public functions, for example Heads of State or of Government, senior politicians, senior government officials, senior judicial officials or senior military officials, senior executives of state owned corporations, and senior political party officials. The definition of a politically exposed person is not intended to cover middle ranking or more junior individuals in the foregoing categories. The PEDP definition may include immediate family members or close associates.

**International Organization Politically Exposed Person** is the primary person who leads the organization (i.e., a president or chief executive officer) as either:

- Head of an international organization established by the government of states; or
- Head of an institution established by an international organization.

This includes immediate family members or close associates. The organization may operate domestically and / or internationally.

## 6 INSTRUCTIONS TO RECEIVE LINE OF CREDIT DISBURSEMENTS

Designate the checking or savings account of the applicant(s) into which you want your line of credit disbursements to be deposited. Disbursements will be made by ACH. Please be sure to use the routing number your financial institution specifies for electronic payments or ACH transactions. You may change your designated deposit account at any time on the Smart Credit website. Any change to your designated deposit account for disbursements will take effect within two (2) business days.

Bank Name	Routing ABA #
Account Name	Account Number

## 7 COLLATERAL INFORMATION

All accounts an Applicant wishes to pledge as collateral must be listed below or under Section 14 (Supplemental Collateral Information) ("Collateral Accounts"). Only taxable, non-retirement accounts are eligible as Collateral Accounts. Account Name/Title must match the Account Name/Title on the collateral account.

Account Number	Account Registration (e.g. single, JTWROS, etc.)	Custodian
Account Name/Title		
Are there any regular monthly distributions from these accounts? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what is the amount and payee? \$ _____ Payee _____		

If the Collateral Account is in the name of a Trust, provide the information below regarding the Trust. See Section 12 (Supplemental Information Checklist) for additional information that will be required to be provided regarding the Trust.

☐ Revocable Trust (Irrevocable Trust not eligible to pledge as Collateral)  
 Name of Trust  
 Name(s) of Grantor(s)                      Name(s) of Trustee(s)                      Tax ID/SSN  
 Principal Residence Address (Street)                      State Where Organized  
 Principal Residence Address (City, State, ZIP)                      Trustee Phone Number

## 8 REPRESENTATIONS AND WARRANTIES

This Supernova Line of Credit Application ("Application") is provided to Supernova Lending, LLC ("Supernova") by the Applicant(s) (individually and collectively, "I" or "me") for its review of my creditworthiness for a Line of Credit secured by the Collateral Account(s) designated herein and payable ON DEMAND (a "Smart Credit"), and Supernova can rely on its contents. I hereby warrant to Supernova that this Application is complete and correct as of the date prepared and that I will promptly inform Supernova of any material changes in the information provided. I authorize Supernova to make whatever inquiries about me Supernova deems appropriate, including for the purposes of verifying or checking on any information given and evaluating my credit and reverifying my credit from time to time, including obtaining credit bureau reports and contacting my employer(s). I authorize Supernova to provide credit information about its credit experience with me to other creditors and credit reporting agencies in accordance with the Fair Credit Reporting Act or similar laws. I acknowledge and agree that Supernova may share and/or request follow-up information regarding this Application with/from my investment advisory firm or directly with/from me. I further acknowledge and agree that Supernova is not obligated to grant credit to me or any other party, and the Supernova may retain this Application even if the credit is not granted.

Do I Have Freeze On My Credit Report? \_\_\_\_\_ ☐ Yes ☐ No \_\_\_\_\_ ☐ Yes ☐ No \_\_\_\_\_ ☐ Yes ☐ No  
 \_\_\_\_\_ ☐ Yes ☐ No \_\_\_\_\_ ☐ Yes ☐ No \_\_\_\_\_ ☐ Yes ☐ No

### Referral Fee

I understand that Supernova and my investment advisory firm ("Firm") are not affiliated entities and the Firm is not a bank. I further acknowledge that, if Supernova grants credit to me pursuant to this Application, the Firm may receive a fee or other compensation for its referral of me to Supernova.

## 9 RISK DISCLOSURE STATEMENT

I am aware of the terms and conditions and the risks involved in a Smart Credit, including, without limitation, the following:

- i. I can lose more funds than are held in the Collateral Account(s) and will be liable for any deficiency;
- ii. Supernova can force the sale or other liquidations of any securities or other investment property in the Collateral Account(s);
- iii. Unless otherwise required by law, Supernova can sell or otherwise liquidate any of the securities in the Collateral Account(s) without first contacting me;
- iv. I am not entitled to choose which securities in the Collateral Account(s) are liquidated or sold;
- v. Such sale or other liquidation by Supernova may result in other adverse consequences, including without limitation, loss of future returns, dividends and appreciation and/or loss of receipt of par or similar guaranteed value due if such investment were held until maturity; I understand and agree that all sales or liquidations by Supernova may be effected by Supernova at times and in manners designed to address Supernova's credit concerns, as determined by Supernova in its sole discretion, and may result in materially less proceeds than if such sales or liquidations had occurred at different times or by different methods;
- vi. Without precluding any other methods of sale or liquidation, Supernova may sell or liquidate any securities or other investment property in the Collateral Account(s) in conformity with reasonable commercial practices of lenders disposing of similar property, which may include sales or dispositions to the issuers of such investment property or their agents. Acceptance of any securities or other investment property in the Collateral Account(s) is not a representation that any market exists for such property or that such issuer or agent is obligated to purchase such investment property;
- vii. Supernova reserves the right, in its sole discretion, to determine which securities or other investment property in the Collateral Account(s) receive collateral value for the credit facility and to change that determination at any time without notice to me;
- viii. Supernova can increase its collateral maintenance requirement at any time and is not required to provide advance written notice to me;
- ix. I am not entitled to an extension of time to satisfy Supernova's collateral maintenance requirement and Supernova is not required to give me such an extension;
- x. There may be adverse tax consequences if securities or other investment property are sold or otherwise liquidated by Supernova; and
- xi. I am not entitled to draw against my Smart Credit to the extent there is credit availability and provided that my Collateral Account(s) meet Supernova's collateral maintenance requirements at the time I make a draw request.

I understand that there may be risks and benefits in pledging certain types of investment assets to secure my Smart Credit. For example, deposit accounts, money funds, and similar investments ("cash equivalents") may produce less interest income or other yield than the interest rate I am paying on my Smart Credit, although such cash equivalents may provide less volatility and more liquidity to help alleviate collateral call risks. I have considered the mix of investments in my Collateral Account(s) carefully and consulted my Investment Advisor (defined below).

*If Applicant is an Individual, please initial here:*

Applicant      Applicant      Applicant      Applicant      Applicant      Applicant

*If Applicant is a Trust, please initial here:*

Name of Trust	Trustee	Trustee	Trustee
Name of Trust	Trustee	Trustee	Trustee

## 10 APPLICANT ACKNOWLEDGMENT AND AGREEMENT

By signing below, I hereby apply for a Smart Credit and consent and agree to all of the terms and conditions contained in this Application. I further acknowledge and confirm that:

1. I have read and understand this Application, including the Investment Advisor Authorization and Agreement.
2. I understand that the Smart Credit is payable ON DEMAND and agree to promptly pay any obligations when due or, in any event, upon demand made by Supernova under the Line of Credit and Security Agreement.
3. All information contained in or submitted in connection with this Application is true, accurate and complete as of the date I execute this Application and I agree to immediately notify Supernova in writing of any changes to such information.

If this Application is being signed by the parties with electronic signatures: I hereby agree that (i) my electronic signature is effective and I will not dispute the legally binding nature, validity or enforceability of this Application based on the fact that the terms were accepted by me with an electronic signature, and (ii) my electronically signed Application may be retained

electronically by Supernova as the original record thereof, and may be admitted into evidence in any proceeding concerning the Application. Supernova agrees to comply with all applicable federal and state electronic records and signatures laws, including but not limited to the Electronic Signatures in Global and National Commerce Act. Supernova may, in its sole discretion, decline to accept, or request further verification of, any attempted electronic signature but shall be entitled to rely on such electronic signature without further verification.

By signing below, I direct Supernova and/or my Investment Advisor (defined below) to execute and deliver all other documents requested by Supernova for the Smart Credit and acknowledge and confirm all of the foregoing.

Any person, whether married, unmarried or separated, may apply for a separate Smart Credit. If this Application is signed by the Applicant and one or more Co-Applicants, such Applicants and Co-Applicants intend to apply for joint credit.

*If Applicant is an Individual, please initial here:*

Applicant      Applicant      Applicant      Applicant      Applicant      Applicant

*If Applicant is a Trust, please initial here:*

Name of Trust	Trustee	Trustee	Trustee
Name of Trust	Trustee	Trustee	Trustee

## 11 INVESTMENT ADVISOR AUTHORIZATION AND AGREEMENT

The undersigned Applicant(s) (individually and collectively, "**I**", "**me**", "**my**") hereby appoint(s) the Investment Advisor Representative ("**IAR**") and Firm designated below to act as my agent(s) as described in this Investment Advisor Authorization (the "**Authorization**").

Investment Advisor Representative Name	Firm Name
Firm Telephone Number	Investment Advisor Representative Producer Number
Investment Advisor Representative Email Address	Firm Address (street, City, State, ZIP)

Supernova may accept instructions from the IAR orally or in writing, regarding, without limitation:

1. Request and discuss with Supernova information regarding balances, rates, terms, and restrictions applicable to the Smart Credit.
2. Submit on my behalf and communicate with Supernova regarding the status of, and issues concerning, my Application.
3. Request the withdrawal of my Application.
4. Request an increase or decrease in the credit limit of my Smart Credit.
5. Request a credit advance or schedule a payment electronically.
6. Request copies of specific account statements, payment history, and other information regarding my Smart Credit.
7. Discuss with Supernova my Collateral Account(s) information, including balances, transactions, fees and payments.
8. Request Supernova close my Smart Credit.
9. Disclose to Supernova personal nonpublic information about me, including but not limited to, identifying information, financial information such as my assets and liabilities, accounts and statements of account wherever held, my income, tax returns, and any other personal nonpublic information about me that may now or hereafter be in the possession of my IAR.

I authorize Supernova to take such actions as it deems necessary to carry out instructions received from me and/or my IAR. I further authorize Supernova, in its sole discretion and for whatever reason, to request additional documentation from me prior to acting upon any instruction or request from my IAR. In addition, I hereby authorize Supernova, in its sole discretion, to restrict my Collateral Account(s) from further activity in the event Supernova receives conflicting or inconsistent instructions. This Authorization shall remain in effect until Supernova receives written notice from me that it has been terminated or revoked.

I, and not Supernova, am responsible for investigating and selecting an IAR. The IAR is not affiliated with, controlled by, or employed by Supernova and Supernova has not recommended the IAR to me. Supernova reserves the right, in its sole discretion, to no longer accept instructions from the IAR and will notify me if it chooses to do so. I have investigated the business experience, qualifications, and reputation of my IAR and am satisfied with the experience, qualifications, and reputation of my IAR. I understand that Supernova has not provided any advice to me regarding this Authorization, and if there is anything about this Authorization that I do not understand, I should consult with my personal attorney for an explanation.

I hereby ratify and confirm any and all dealings effected in and for my Smart Credit by my IAR, and agree to indemnify and hold harmless Supernova, its affiliates, and their directors, officers, employees, and agents from and against all claims, actions, judgments, settlement amounts, costs and liabilities, including attorney's fees, arising out of or relating to its reliance upon this Authorization and actions taken in reliance upon the IAR's instructions prior to Supernova's receipt of my written notice of termination or revocation of this Authorization and a reasonable time for Supernova to act thereon. Furthermore, I agree to indemnify and hold Supernova harmless from, and to pay Supernova promptly upon demand for, any and all losses or financial obligations which may arise from the acts or omissions of my IAR with respect to my Smart Credit. I also agree that Supernova will not be liable, and will not attempt to hold Supernova liable, for any instruction or decision made by my IAR, whom I have selected, regardless of whether or not any such instruction or decision was specifically authorized by me. The foregoing provision will survive the revocation or termination of this Authorization and the Line of Credit and Security Agreement.

By signing below, Applicant agrees to the terms and conditions of the Investment Advisor Authorization and Agreement.

*If Applicant is an individual, please sign here:*

Applicant	Date	Applicant	Date	Applicant	Date
Applicant	Date	Applicant	Date	Applicant	Date

*If Applicant is a Trust, please sign here:*

Name of Trust	Trustee	Date
Trustee	Date	Trustee
Trustee	Date	Trustee
Name of Trust	Trustee	Date
Trustee	Date	Trustee
Trustee	Date	Trustee

## 12 SUPPORT DOCUMENTS

---

For all applicants:

☐ If paying off an existing securities based loan, attach a copy of the loan statement

If any Collateral Account is in the name of a revocable trust:

☐ Trustee Certification (available on the Smart Credit website)vv

## 13 STATE DISCLOSURES

---

**California Residents:** Married applicants may apply for a separate account.

**Ohio Residents:** The Ohio laws against discrimination require that all creditors make credit equally available to all credit worthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law.

**Wisconsin Residents:** For married Wisconsin residents, by submitting your application you are confirming that this loan (if granted) is being incurred in the interest of your marriage and your family. No provision of a marital property agreement, unilateral statement under §776.59 of the Wisconsin Statutes or court order under §776.70 of the Wisconsin Statutes adversely affects the interests of a lender unless the lender, prior to the time the credit is granted, is furnished a copy of the agreement, statement or decree or has actual knowledge of the adverse provision when the obligation to the lender is incurred. If the loan for which you are applying is granted, you will notify the lender if you have a spouse who needs to receive notification that credit has been extended to you.

## 14 SUPPLEMENTAL COLLATERAL INFORMATION

All accounts an Applicant wishes to pledge as collateral must be listed below or above in section 7 (Collateral Information) ("Collateral Accounts"). Only taxable, non-retirement accounts are eligible as Collateral Accounts. Account Name/Title must match the Account Name/Title on the collateral account.

Account Number	Account Registration (e.g. single, JTWROS, etc.)	Custodian
Account Name/Title		
Are there any regular monthly distributions from these accounts? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what is the amount and payee? \$ _____		
	Amount	Payee

If the Collateral Account is in the name of a Trust, provide the information below regarding the Trust. See Section 12 (Supplemental Information Checklist) for additional information that will be required to be provided regarding the Trust.

<input type="checkbox"/> Revocable Trust (Irrevocable Trust not eligible to pledge as Collateral)		
Name of Trust		
Name(s) of Grantor(s)	Name(s) of Trustee(s)	Tax ID/SSN
Principal Residence Address (Street)	State Where Organized	
Principal Residence Address (City, State, ZIP)	Trustee Phone Number	

Account Number	Account Registration (e.g. single, JTWROS, etc.)	Custodian
Account Name/Title		
Are there any regular monthly distributions from these accounts? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what is the amount and payee? \$ _____		
	Amount	Payee

If the Collateral Account is in the name of a Trust, provide the information below regarding the Trust. See Section 12 (Supplemental Information Checklist) for additional information that will be required to be provided regarding the Trust.

<input type="checkbox"/> Revocable Trust (Irrevocable Trust not eligible to pledge as Collateral)		
Name of Trust		
Name(s) of Grantor(s)	Name(s) of Trustee(s)	Tax ID/SSN
Principal Residence Address (Street)	State Where Organized	
Principal Residence Address (City, State, ZIP)	Trustee Phone Number	

Account Number	Account Registration (e.g. single, JTWROS, etc.)	Custodian
Account Name/Title		
Are there any regular monthly distributions from these accounts? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what is the amount and payee? \$ _____		
	Amount	Payee

If the Collateral Account is in the name of a Trust, provide the information below regarding the Trust. See Section 12 (Supplemental Information Checklist) for additional information that will be required to be provided regarding the Trust.

<input type="checkbox"/> Revocable Trust (Irrevocable Trust not eligible to pledge as Collateral)		
Name of Trust		
Name(s) of Grantor(s)	Name(s) of Trustee(s)	Tax ID/SSN
Principal Residence Address (Street)	State Where Organized	
Principal Residence Address (City, State, ZIP)	Trustee Phone Number	