

TRUSTEES

SUPPLEMENTAL APPLICATION

	Applicant	:	
	1. Plea	se attach the following:	
	a.	The Trust Document;	
	b.	Resumes of all Trustees;	
	C.	Most recent audited Financial Statements of the Trust.	
		ere any commingling of the Trust's funds with any other funds? ES, please attach full details.	YES NO
	3. Are	the Trustees beneficiaries of the Trust?	YES NO
	If YE	S, please attach full details.	
		he Trustees have discretionary authority in investment of t's funds?	YES NO
	If YE	S, please attach full details.	
	5. Is ar	n independent Investment Counselor used?	YES NO
	If YE	S, what is his/her name?	
	If NO	D, please advise what types of investments are utilized:	
		n independent Certified Public Accountant used to prepare file the Trust's financial statements and tax forms?	YES NO
	If YE	S, what is his/her name?	
		any of the Trustees have a current loan, or have they ever had an, from the Trust?	YES NO
	If YE	S, please attach full details.	_ _
	8. If ap	plicable, in what year is the Trust to be dissolved?	
	9. Wha	at is the Asset Value of the Trust in question?	\$
		nt type of Trust is being Administered? eficiary Liquidating	Bankruptcy
		<u>—</u>	
It is understood and agreed that the and Omissions Insurance.	nis suppler	nental application shall become a part of the application for Profe	essional Liability Errors
Name of applicant:			
Signature of person authorized to execute on behalf of the applicant: Date:			

A copy of this application should be retained for your records.