



SUPPLEMENTAL APPLICATION, INFORMATION SHEET AND CERTIFICATE FOR A TRUST ACCOUNT

The undersigned Trustee(s) has applied for a Trust Account at Educational Systems Federal Credit Union (ESFCU). The account is to be called the _____ Trust Account. In support of that application, the undersigned Trustee(s) provides the following information and certifies it to be true:

- The name of the Trust for which this Trust Account is being opened is _____
■ The date of the Trust is: _____
■ The Trust has been amended on the following dates: _____
■ The undersigned is/are the only Trustee(s) of the Trust.
■ The Trust designates the following as Successor Trustees:

■ The grantor(s) of the Trust is/are:

■ The Trust is revocable/irrevocable: _____
■ The attorney who drafted the Trust is: _____
■ The Federal Tax Identification Number of the Trust is: _____
■ The undersigned certifies that I/we have authority to open this Trust Account and bind the Trust consistent with the terms of the Trust Account Agreement for the Trust for which we apply.
■ The undersigned acknowledge receipt and review of all pertinent, relevant account agreements, forms and documents.
■ The undersigned jointly and severally indemnify and hold ESFCU harmless from any liability related in any way to the Trust Account as a result of acting upon instructions provided by the undersigned.
■ If the Trust is changed in any way, or if for any reason new and/or Successor Trustee(s) are designated or assume trusteeship of the Trust, or if the composition of the Trustees changes, the undersigned will notify ESFCU in writing of such facts, and ESFCU may rely upon the accuracy of all information on this document until such time as written notice to the contrary is received by ESFCU.
■ For any reason within the sole discretion of ESFCU, the undersigned shall execute and provide unto ESFCU any document which in the sole judgment of ESFCU is necessary to effectuate the Trust Account Agreement, related documents, and/or to administer the Trust Account.

Witness(es): _____ Trustee(s): _____ Date(s): _____

