



Promissory Note Investment Application



Type of Investment

Please select one account type (A, B or C) and provide the information requested for that section.

A. Individual or Joint Investment (An investor must be of legal age for the state in which s/he resides in order to be listed as an Individual or a Joint Owner of an account.)

Owner (first, middle initial, last) _____

Birth Date (mm/dd/yyyy) _____ Social Security Number _____

Joint Owner (first, middle initial, last) _____

Birth Date (mm/dd/yyyy) _____ Social Security Number _____

or

B. Uniform Gifts/Transfers to Minors Act Investment

Custodian's Name (first, middle initial, last) _____

Birth Date (mm/dd/yyyy) _____ Social Security Number _____

Minor's Name (first, middle initial, last) _____

Birth Date (mm/dd/yyyy) _____ Social Security Number _____

This investment is being made under the _____ (name of state) Uniform Gifts/Transfers to Minors Act. *UGMA/UTMA accounts will be registered in the minor's Social Security number.

or

C. Business of Organization Investment

Name of Business or Organization _____

Employer Identification Number _____

Contact Person _____

Title _____

Is Business or Organization an accredited investor (total assets in excess of \$5 million)? Yes No

Type of Organization:

Corporation Nonprofit/Gov't Partnership

Address

Please provide the requested information for the primary registrant only. This information will be used as the address of record for correspondence.

Address _____

City _____ State _____ Zip Code _____

Home Telephone Number _____ Work Telephone Number _____

Email Address _____

Please indicate whether or not we may list you among our financial supporters in the annual report.

- Yes, please list my/our name(s) in the annual report.
- No, please do not list my/our name(s) in the annual report.

I would like to receive all communications related to my investment:

- by mail.
- electronically.

