## REQUEST TO ESTABLISH AN ACCOUNT FOR TRUST

	Credit Union is hereby requested to establish an
account for the following o	lescribed Trust. The information contained below is
provided to enable the Cre	edit Union to properly document the establishment
and nature off the account	1 1 ,
	` ,
Name of Trust	
,	
Date Trust Established	
Name(s) of the Trustee(s)	
Number of Trustees Autho	
Please check the appropria	te box:
_	
	orized to act independently in order to transact
business involving t	this account.
	t together to transact any business on behalf of the
Trust involving this	account.
A 1.1 1.1 1.1	fination Number (TIN)
Account's Taxpayer Identi	jiculion inumber (1111)
 If you are unsure which TI	N to use, contact your tax advisor or attorney.
if you are unsure writer if	iv to use, contact your tax advisor or attorney.
Payroll/Direct Deposit Au	thorization
•	sit/payroll deduction to be deposited to my Trust's
Account No	immediately.

Share Draft/ATM Card Authorization		
I/we authorize: ☐ an ATM card ☐ shar	e drafts to be ordered in the name(s) indicated below:	
Voting Designation		
I/we designate the trustee r	named below to vote at all credit union elections:	
Hold Harmless Agreement The undersigned trustee(s)	hereby agree(s) on behalf of the Trust and its	
	edit Union harmless from any loss incurred by the ulting from the Credit Union's good faith reliance	
upon any of the information	n set forth herein or upon any instructions regarding Credit Union from the Trustee(s) of the Trust.	
Membership Eligibility		
For this Trust to be a membership in the Credit U	per, all parties to the Trust must be eligible for Jnion.	
Certification of Trustee(s)		
e e	trustee(s) of the Trust referred to above. I/we am/are unt of the type referred to above and certify that all of	
the information provided is		
Trustee	Date	
Trustee	Date	
_	Date	
Trustee	Date	