

Application and Information Sheet

Company Agent:

_____ you as today's representative

Company Name:

_____ as to appear on certificates

Company Address:

City/State/Zip:

Contact Person:

Contact Phone Number:

Contact Fax Number:

Contact Email Address:

Federal Tax ID Number:

_____ required for purchase

Please attach W-9 Form if you have one with you.

All certificates will be returned to the company address provided above when processing of the certificates is complete. The certificates will be returned to the investor by regular mail. Redemption payments on Certificates will be returned to the investor by regular mail when the original certificates and receipts have been returned to the Treasurer on request. If you want your original certificates retained by the treasurer, you must submit a written request.

Please make all checks to :

MELANIE CURRY
Adams County Treasurer
500 West 4th Street
Hastings NE 68901