

# NACRS ETA APPLICATION & ORDER

FOLLOW INSTRUCTIONS (front & back) CAREFULLY

A. DATE (dd/mm/yyyy):
B. APPLICANT'S NAME & PHONE (including area or country code):
C1. MAILING ADDRESS (UPS & FedEx will not deliver trusts to P.O. Box):
C2. E-MAIL ADDRESS (this is address to which confirmations will be sent):

**LEAVE THE ABOVE SPACE BLANK FOR US**

**1. TRUSTEE'S INFORMATION** - enter name in upper & lower case letters exactly as it is to be spelled in trust - include prefix (e.g.: "Mr." "Mrs." "Ms.") - do not abbreviate state (e.g.: "TX" "NV" "IL") - use "Tex." "Nev." "Ill." etc. - place postal code in brackets (e.g.: "[21355]" not "21355" or "21355-4412")

1a. INDIVIDUAL'S LEGAL NAME				PREFIX
1b. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

**2. ADDITIONAL TRUSTEE'S INFORMATION** - enter name in upper & lower case letters exactly as it is to be spelled in trust - include prefix (e.g.: "Mr." "Mrs." "Ms.") - do not abbreviate state (e.g.: "TX" "NV" "IL") - use "Tex." "Nev." "Ill." etc. - place postal code in brackets (e.g.: "[21355]" not "21355" or "21355-4412")

2a. INDIVIDUAL'S LEGAL NAME				PREFIX
2b. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

**3. ADDITIONAL TRUSTEE'S INFORMATION** - enter name in upper & lower case letters exactly as it is to be spelled in trust - include prefix (e.g.: "Mr." "Mrs." "Ms.") - do not abbreviate state (e.g.: "TX" "NV" "IL") - use "Tex." "Nev." "Ill." etc. - place postal code in brackets (e.g.: "[21355]" not "21355" or "21355-4412")

3a. INDIVIDUAL'S LEGAL NAME				PREFIX
3b. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

**4. EXPRESS TRUST ARRANGEMENT INFORMATION** - check one of the following arrangement & model description boxes - if order is for Custom Express Trust Arrangement or Custom Trust Model then check appropriate box & enter total number of trusts comprising the arrangement & use ETA Addendum(s) for additional trust names - enter your custom set and/or custom model reference number in item 14d - attach all Addendum(s) to this form when mailing in

<input type="checkbox"/> 3 EXPRESS TRUST SET BASIC MODEL	<input type="checkbox"/> 3 EXPRESS TRUST SET BUSINESS MODEL	<input type="checkbox"/> 3 EXPRESS TRUST SET CUSTOM MODEL
<input type="checkbox"/> 6 EXPRESS TRUST SET BASIC MODEL	<input type="checkbox"/> 6 EXPRESS TRUST SET BUSINESS MODEL	<input type="checkbox"/> 6 EXPRESS TRUST SET CUSTOM MODEL
<input type="checkbox"/> 9 EXPRESS TRUST SET BASIC MODEL	<input type="checkbox"/> 9 EXPRESS TRUST SET BUSINESS MODEL	<input type="checkbox"/> 9 EXPRESS TRUST SET CUSTOM MODEL
<input type="checkbox"/> CUSTOM EXPRESS TRUST SET BASIC MODEL	<input type="checkbox"/> CUSTOM EXPRESS TRUST SET BUSINESS MODEL	<input type="checkbox"/> CUSTOM EXPRESS TRUST SET CUSTOM MODEL
TOTAL NUMBER OF TRUSTS:	TOTAL NUMBER OF TRUSTS:	TOTAL NUMBER OF TRUSTS:

**5. EXPRESS TRUST EXACT FULL LEGAL NAME** - enter name in upper & lower case letters including suffix exactly as the name should appear on all trust documents - do not abbreviate - use of your name within the trust name is not recommended - do not use suffixes such as "Company" "Corporation" "Corp." "Limited" "Association" "Inc." "Co." "LLC" "Ltd." (these are inaccurate and misleading) - instead you may wish to use "Group" "Holdings" "Enterprises" "Services" "Products" "Management" "Network" and the like - enter item number of the trustee(s) who will serve on this trust (if all trustees will serve on this trust then enter "ALL") - check appropriate trust function box - if trust arrangement is custom check "other" function and specify

5a. TRUST'S NAME				5b. TRUSTEE ITEM NUMBER	
5c. TRUST FUNCTION:	<input type="checkbox"/> MASTER	<input type="checkbox"/> ADMINISTRATIVE	<input type="checkbox"/> ASSET	<input type="checkbox"/> HOME/REAL ESTATE	
	<input type="checkbox"/> HOLDING	<input type="checkbox"/> MANAGEMENT	<input type="checkbox"/> AUTO	<input type="checkbox"/> OTHER (please specify):	

**6. ADDITIONAL EXPRESS TRUST EXACT FULL LEGAL NAME** - enter name in upper & lower case letters including suffix exactly as the name should appear on all trust documents - do not abbreviate - use of your name within the trust name is not recommended - do not use suffixes such as "Company" "Corporation" "Corp." "Limited" "Association" "Inc." "Co." "LLC" "Ltd." (these are inaccurate and misleading) - instead you may wish to use "Group" "Holdings" "Enterprises" "Services" "Products" "Management" "Network" and the like - enter item number of the trustee(s) who will serve on this trust (if all trustees will serve on this trust then enter "ALL") - check appropriate trust function box - if trust arrangement is custom check "other" function and specify

6a. TRUST'S NAME				6b. TRUSTEE ITEM NUMBER	
6c. TRUST FUNCTION:	<input type="checkbox"/> MASTER	<input type="checkbox"/> ADMINISTRATIVE	<input type="checkbox"/> ASSET	<input type="checkbox"/> HOME/REAL ESTATE	
	<input type="checkbox"/> HOLDING	<input type="checkbox"/> MANAGEMENT	<input type="checkbox"/> AUTO	<input type="checkbox"/> OTHER (please specify):	

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**7. ADDITIONAL EXPRESS TRUST EXACT FULL LEGAL NAME** - enter name in upper & lower case letters including suffix exactly as the name should appear on all trust documents - do not abbreviate - use of your name within the trust name is not recommended - do not use suffixes such as "Company" "Corporation" "Corp." "Limited" "Association" "Inc." "Co." "LLC" "Ltd." (these are inaccurate and misleading) - instead you may wish to use "Group" "Holdings" "Enterprises" "Services" "Products" "Management" "Network" and the like - enter item number of the trustee(s) who will serve on this trust (if all trustees will serve on this trust then enter "ALL") - check appropriate trust function box - if trust arrangement is custom check "other" function and specify

7a. TRUST'S NAME						7b. TRUSTEE ITEM NUMBER		
7c. TRUST FUNCTION:	<input type="checkbox"/>	MASTER	<input type="checkbox"/>	ADMINISTRATIVE	<input type="checkbox"/>	ASSET	<input type="checkbox"/>	HOME/REAL ESTATE
	<input type="checkbox"/>	HOLDING	<input type="checkbox"/>	MANAGEMENT	<input type="checkbox"/>	AUTO	<input type="checkbox"/>	OTHER (please specify):

**8. ADDITIONAL EXPRESS TRUST EXACT FULL LEGAL NAME** - enter name in upper & lower case letters including suffix exactly as the name should appear on all trust documents - do not abbreviate - use of your name within the trust name is not recommended - do not use suffixes such as "Company" "Corporation" "Corp." "Limited" "Association" "Inc." "Co." "LLC" "Ltd." (these are inaccurate and misleading) - instead you may wish to use "Group" "Holdings" "Enterprises" "Services" "Products" "Management" "Network" and the like - enter item number of the trustee(s) who will serve on this trust (if all trustees will serve on this trust then enter "ALL") - check appropriate trust function box - if trust arrangement is custom check "other" function and specify

8a. TRUST'S NAME						8b. TRUSTEE ITEM NUMBER		
8c. TRUST FUNCTION:	<input type="checkbox"/>	MASTER	<input type="checkbox"/>	ADMINISTRATIVE	<input type="checkbox"/>	ASSET	<input type="checkbox"/>	HOME/REAL ESTATE
	<input type="checkbox"/>	HOLDING	<input type="checkbox"/>	MANAGEMENT	<input type="checkbox"/>	AUTO	<input type="checkbox"/>	OTHER (please specify):

**9. ADDITIONAL EXPRESS TRUST EXACT FULL LEGAL NAME** - enter name in upper & lower case letters including suffix exactly as the name should appear on all trust documents - do not abbreviate - use of your name within the trust name is not recommended - do not use suffixes such as "Company" "Corporation" "Corp." "Limited" "Association" "Inc." "Co." "LLC" "Ltd." (these are inaccurate and misleading) - instead you may wish to use "Group" "Holdings" "Enterprises" "Services" "Products" "Management" "Network" and the like - enter item number of the trustee(s) who will serve on this trust (if all trustees will serve on this trust then enter "ALL") - check appropriate trust function box - if trust arrangement is custom check "other" function and specify

9a. TRUST'S NAME						9b. TRUSTEE ITEM NUMBER		
9c. TRUST FUNCTION:	<input type="checkbox"/>	MASTER	<input type="checkbox"/>	ADMINISTRATIVE	<input type="checkbox"/>	ASSET	<input type="checkbox"/>	HOME/REAL ESTATE
	<input type="checkbox"/>	HOLDING	<input type="checkbox"/>	MANAGEMENT	<input type="checkbox"/>	AUTO	<input type="checkbox"/>	OTHER (please specify):

**10. ADDITIONAL EXPRESS TRUST EXACT FULL LEGAL NAME** - enter name in upper & lower case letters including suffix exactly as the name should appear on all trust documents - do not abbreviate - use of your name within the trust name is not recommended - do not use suffixes such as "Company" "Corporation" "Corp." "Limited" "Association" "Inc." "Co." "LLC" "Ltd." (these are inaccurate and misleading) - instead you may wish to use "Group" "Holdings" "Enterprises" "Services" "Products" "Management" "Network" and the like - enter item number of the trustee(s) who will serve on this trust (if all trustees will serve on this trust then enter "ALL") - check appropriate trust function box - if trust arrangement is custom check "other" function and specify

10a. TRUST'S NAME						10b. TRUSTEE ITEM NUMBER		
10c. TRUST FUNCTION:	<input type="checkbox"/>	MASTER	<input type="checkbox"/>	ADMINISTRATIVE	<input type="checkbox"/>	ASSET	<input type="checkbox"/>	HOME/REAL ESTATE
	<input type="checkbox"/>	HOLDING	<input type="checkbox"/>	MANAGEMENT	<input type="checkbox"/>	AUTO	<input type="checkbox"/>	OTHER (please specify):

**11. ADDITIONAL EXPRESS TRUST EXACT FULL LEGAL NAME** - enter name in upper & lower case letters including suffix exactly as the name should appear on all trust documents - do not abbreviate - use of your name within the trust name is not recommended - do not use suffixes such as "Company" "Corporation" "Corp." "Limited" "Association" "Inc." "Co." "LLC" "Ltd." (these are inaccurate and misleading) - instead you may wish to use "Group" "Holdings" "Enterprises" "Services" "Products" "Management" "Network" and the like - enter item number of the trustee(s) who will serve on this trust (if all trustees will serve on this trust then enter "ALL") - check appropriate trust function box - if trust arrangement is custom check "other" function and specify

11a. TRUST'S NAME						11b. TRUSTEE ITEM NUMBER		
11c. TRUST FUNCTION:	<input type="checkbox"/>	MASTER	<input type="checkbox"/>	ADMINISTRATIVE	<input type="checkbox"/>	ASSET	<input type="checkbox"/>	HOME/REAL ESTATE
	<input type="checkbox"/>	HOLDING	<input type="checkbox"/>	MANAGEMENT	<input type="checkbox"/>	AUTO	<input type="checkbox"/>	OTHER (please specify):

**12. ADDITIONAL EXPRESS TRUST EXACT FULL LEGAL NAME** - enter name in upper & lower case letters including suffix exactly as the name should appear on all trust documents - do not abbreviate - use of your name within the trust name is not recommended - do not use suffixes such as "Company" "Corporation" "Corp." "Limited" "Association" "Inc." "Co." "LLC" "Ltd." (these are inaccurate and misleading) - instead you may wish to use "Group" "Holdings" "Enterprises" "Services" "Products" "Management" "Network" and the like - enter item number of the trustee(s) who will serve on this trust (if all trustees will serve on this trust then enter "ALL") - check appropriate trust function box - if trust arrangement is custom check "other" function and specify

12a. TRUST'S NAME						12b. TRUSTEE ITEM NUMBER		
12c. TRUST FUNCTION:	<input type="checkbox"/>	MASTER	<input type="checkbox"/>	ADMINISTRATIVE	<input type="checkbox"/>	ASSET	<input type="checkbox"/>	HOME/REAL ESTATE
	<input type="checkbox"/>	HOLDING	<input type="checkbox"/>	MANAGEMENT	<input type="checkbox"/>	AUTO	<input type="checkbox"/>	OTHER (please specify):

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13. ADDITIONAL EXPRESS TRUST EXACT FULL LEGAL NAME - enter name in upper & lower case letters including suffix exactly as the name should appear on all trust documents - do not abbreviate - use of your name within the trust name is not recommended - do not use suffixes such as "Company" "Corporation" "Corp." "Limited" "Association" "Inc." "Co." "LLC" "Ltd." (these are inaccurate and misleading) - instead you may wish to use "Group" "Holdings" "Enterprises" "Services" "Products" "Management" "Network" and the like - enter item number of the trustee(s) who will serve on this trust (if all trustees will serve on this trust then enter "ALL") - check appropriate trust function box - if trust arrangement is custom check "other" function and specify

13a. TRUST'S NAME						13b. TRUSTEE ITEM NUMBER		
13c. TRUST FUNCTION:	<input type="checkbox"/>	MASTER	<input type="checkbox"/>	ADMINISTRATIVE	<input type="checkbox"/>	ASSET	<input type="checkbox"/>	HOME/REAL ESTATE
	<input type="checkbox"/>	HOLDING	<input type="checkbox"/>	MANAGEMENT	<input type="checkbox"/>	AUTO	<input type="checkbox"/>	OTHER (please specify):

14. ORDER PROCESSING INFORMATION - enter the total number of trusts & trustees within all of your ordered arrangements (e.g.: if 9 Express Trust Set/Business Model & 6 Express Trust Set/Custom Model then your total number of trusts will be 15. If 3 trustees each serve on only 4 separate trusts then your total number of trustees will be 3) - calculate all amounts for payment in US Dollars of their equivalent (if your order is custom enter the dollar amount quoted to you by our representative) - check appropriate box indicating your method of payment - credit card payments please contact representative before submitting this form and enter card carrier (e.g.: "Visa" "Mastercard" etc.) - Western Union & Moneygram payments enter the funds transfer passcode in space provided - enter reference number - enter name of representative who assisted you - please include full payment with this order form when mailing - allow 7-14 business days for delivery

14a. TOTAL NUMBER OF TRUSTS:		14b. TOTAL NUMBER OF TRUSTEES:		14c. TOTAL DOLLAR AMOUNT OF ORDER:		
14d. PAYMENT METHOD:	<input type="checkbox"/>	DOMESTIC POSTAL MONEY ORDER	<input type="checkbox"/>	CREDIT CARD:	<input type="checkbox"/>	GOLD/SILVER FUNDS TRANSFER:
	<input type="checkbox"/>	INT'L POSTAL MONEY ORDER (please specify originating country):				
14e. REFERENCE NUMBER:				14f. NAME OF REPRESENTATIVE HANDLING ORDER:		
14g. ADDITIONAL INFORMATION REGARDING ORDER:						

I/We, the undersigned do hereby expressly acknowledge and agree that all payments are nonrefundable and this Order is nontransferable, a private contract between myself/ourselves and NACRS, subject to the disclaimer, privacy policy, and terms of service set forth by NACRS at its web site (<http://www.nacrs.org>) which are fully incorporated herein by reference. I/We further expressly understand and agree that this Order will not be processed until payment in full is received by NACRS; in the event payment is not received, no services will be rendered and no products will be delivered; NACRS assumes no liability for Post Office or Postal Service errors nor for the errors of carriers.

By submitting this Order and tendering payment, I/We appoint the NACRS representative named in Item 14f above as my/our proxy to attend any necessary face-to-face meeting(s) on the date of trust creation for the limited purposes of accepting any notice of meeting and representing my/our interest in the meeting's proceedings. I/We expressly acknowledge and agree to observe all copyright laws in force and effect respecting the web site, trust documents, instruments, arrangement, and trust model layout, form, design and particulars whatever. I/We further expressly acknowledge and agree that the information, materials, products and services ordered by myself/ourselves are proprietary, belong to and are the exclusive property of NACRS and shall not be copied or duplicated in any manner, shape, or form, by any device or process, electronic or mechanical whatever without the express written permission of NACRS. I/We and NACRS expressly agree not to disclose the details, particulars, and specific constituents of this private contract to any person, at any time, under any circumstances whatever; that this Order has been submitted voluntarily and freely and that the dollar amounts have been arrived at on an arm's length basis and are fair and reasonable.

This Order, including the disclaimer, privacy policy, and terms of services referenced herein, sets forth the entire contract, agreement and understanding between the parties as to the subject-matter hereof and merges and supersedes all prior discussions, agreements and understandings of every kind and nature between them. Upon completion of this Order, NACRS shall not be bound to render any further service or provide any further products or have any further involvement with applicant(s), other than as expressly stated in this Order or as may be agreed to by the parties subsequent to the date of this Order. This contract shall not be changed, modified or amended except by a writing dated and signed by the party to be charged. All addenda attached hereto or enclosed herewith are fully incorporated herein by reference.

EXECUTED ON THE DATE FIRST GIVEN IN ITEM "A" ABOVE.

LEGAL SIGNATURE OF APPLICANT

LEGAL SIGNATURE OF APPLICANT

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## Instructions for filling out this Form

Please type or laser-print this form. Be sure it is completely legible. Read all instructions carefully; correct spelling of Trustee names and Trust names is crucial. Follow instructions completely. Fill in the form very carefully; all information in the form will be considered as correct and intended and the product or service will be provided based upon it "as-is". If you have any questions regarding the form, contact a representative of NACRS.

If you need additional space, use the appropriate Addendum (Additional Trustees — Form ETAad1 or Additional Trusts — Form ETAad2). When the form has been properly completed, send it with all addenda attached along with the full payment to the following address exactly as it is indicated below:

**NACRS**  
**In care of:**  
**Golde & Powers**  
**c/o 1930 Village Center Circle**  
**Suite 3-213**  
**Las Vegas, Nevada [89134]**

Payment may be made in the form of Postal Money Order (International or Domestic), Credit Card by making arrangements with an NACRS representative, or by gold/silver funds transfer by contacting the Gold & Silver Exchange at **1 (414) 234-8267** and setting up a funds transfer. For Credit Card or wire payments contact a NACRS representative at **(702) 357-8830** and provide the representative with the transfer information. All Postal Money Orders must be left blank with the customer's receipt/stub attached. Write only the UPS or FedEx tracking number you are shipping with on the customer's receipt/stub in the blank space below "Address" then make a front and back copy for your records prior to sealing the completed form and payment in the envelope.

### 1. TRUSTEE'S INFORMATION:

**1a.** Enter only one Trustee's name. Spell legal name in True Name form (upper and lower case) as it is crucial to the identifying of the parties to the trust instruments. If Trustee is an organization enter full legal name of Organization and include its suffix in box marked "prefix".

**1b.** Include the mailing address of the Trustee. This must be a physical address as UPS and FedEx do not deliver to P.O. Boxes.

### 2 & 3. ADDITIONAL TRUSTEE'S INFORMATION:

Follow instructions for item 1. Additional Trustees are no less empowered than the first trustee under our standard 3, 6 & 9 Express Trust sets. If separation of powers and/or more than 3 trustees are necessary to suit your particular needs, you should contact an NACRS representative as you will be needing a Custom Express Trust set. Ultimately, all trustees in standard Express Trust sets constitute the Board of Trustees of the trusts ordered.

### 4. EXPRESS TRUST ARRANGEMENT INFORMATION:

Check the appropriate box for the type of Express Trust arrangement you are ordering. If you are ordering arrangement of more than one type, check the appropriate boxes. If ordering a Custom set or model, enter the total number of trusts comprising the custom set in the appropriate space. Be sure the total number of trusts corresponds with the total number of trusts named.

### 5. EXPRESS TRUST EXACT FULL LEGAL NAME:

**5a.** Enter only one Trust's name. Spell this name in True Name form (upper and lower case letters); it is crucial to the naming of the trust in the trust instruments. Avoid using suffixes such as "Company" "Corporation" "Corp." "Limited" "Association" "Inc." "Co." "LLC" or "Ltd." as these are inaccurate and misleading because they connote a statutory mode of creation and organization. Instead you may wish to use "Group" "Holdings" "Enterprises" "Services" "Products" "Management" even "Trust". Using the suffix "Trust" is often unnecessary simply because the nature of the Trust Organization can be represented with other

statements. It has been suggested that one avoid using the suffix "Foundation" because such designated organizations may be interpreted as being statutory in nature, however generally.

**5b.** Enter item number of each Trustee who will serve on this trust. If multiple Trustees will serve, enter only the item number of the Trustees who will serve separated by a comma. If all Trustees will serve on this trust enter the word "ALL" in capital letters.

**5c.** Check the appropriate trust function box. Though it is completely at the sole discretion of the Trustee(s) what particular function a trust will serve in any given Model, we ask that only one function be checked per trust; each trust is assigned a particular purpose in its life at the time of its creation. If the function is a "Custom" function, enter the brief description of that function as provided by our representative.

### 6-13. ADDITIONAL EXPRESS TRUST EXACT FULL LEGAL NAME:

Follow instructions for item 5. Additional Trusts are those other than the first named trust in the set and are no less capable or empowered. If custom capabilities or varied powers is necessary to suit your particular needs, you should contact an NACRS representative as you will be needing a Customized Express Trust.

### 14. ORDER PROCESSING INFORMATION:

**14a&b.** Enter the total number of trusts and trustees.

**14c.** Enter the total dollar amount of the order for which payment will be made. Calculate this amount in U.S. Dollars or their equivalent.

**14d.** Check appropriate box for the method of your payment. If by Credit Card enter the credit card carrier. If by gold/silver funds transfer enter coin description.

**14e.** Enter the reference number given to you by the NACRS representative you contacted and who handled your order.

**14f.** Enter the first initial and last name of the representative who issued you the reference number and handled your order.

**14g.** Enter any additional information or notes regarding your order.