NEW ACCOUNT INFORMATION

Date: 04/02/2009

Opened by: Terence Steffen

☒ REPLACEMENT

Thrivent Financial Bank

2000 E Milestone Drive
Appleton, WI 54919-0001
Lyndale

ACCOUNT INFORMATION

Title of Account(s): Lois M Overland
Douglas & Lois Overland Tr Dtd 5/23/03
Carol A Overland- POA
3535 Bryant Ave S Apt # 417
Minneapolis, MN 55408-4133

Account Type:
Account Type:
Account Type:
Account Type:

Account Number: 00201012010
Account Number:
Account Number:
Account Number:

Account TIN: 472-16-2246

OWNERSHIP TYPE Trust

Words, numbers or phrases preceded by a ☐ are applicable only if the ☒ is marked.

BUSINESS ENTITY INFORMATION

Business Name: Douglas & Lois Overland Tr .Dtd 5/23/03

Business Address:

3535 Bryant Ave S # 417
Minneapolis, MN 55408-4133

Assumed Name if DBA:

Nature of Business

TAXPAYER IDENTIFICATION NUMBER CERTIFICATION

Sign Here

I certify under penalties of perjury that the taxpayer identification number (TIN) provided is correct, I am a U.S. person (including a U.S. resident alien), and I am either exempt from backup withholding under Internal Revenue Service regulations, or I am not subject to backup withholding.
The above statement is true with the exception that:

☐ I am subject to backup withholding because of underreported interest and dividends.

☐ I have applied or will soon apply for a TIN. If one is not provided to this institution within 60 days from today, I will be subject to backup withholding.

☐ I am a Foreign Recipient and have provided this institution with the appropriate Form W-8 certification.

X
SIGNATURE Lois M Overland DATE Taxpayer Identification Number: 472-16-2246

OVERDRAFT PROTECTION

Establish Overdraft Protection from account number to account number in increments of $. I understand a fee of $ will be charged for each transfer. Thrivent Financial Bank will notify me of any changes 30 days in advance of the change. This authorization will remain in effect until terminated by Thrivent Financial Bank, an authorized signer on the deposit account, or upon account closing.

CERTIFICATION

Sign Here

Federal Law requires Thrivent Financial Bank to obtain and verify your name, street address, date of birth and taxpayer identification number before opening an account.
By signing this document, the undersigned acknowledge that they have opened the type of account designated above, and have received, understand, and agree to be bound by the terms of the Account Agreement for that account type. If this is a consumer account, the undersigned acknowledge receipt of an Account Disclosure, and a copy of this institution's Privacy Policy. The undersigned also acknowledge receipt, where applicable, of this institution's Funds Availability Policy and/or Electronic Funds Transfer Agreement. If this account is opened in the name of a business entity, all signers authorize this institution to make inquiries from any consumer reporting agency, including a check protection service, in connection with this account.

OF SIGNATURES REQUIRED: 1

☐ Authorized Signer Only
X
Lois M Overland Date

☐ Authorized Signer Only
X Carol A Overland
Carol A Overland Date

☐ Authorized Signer Only
X
Date

☐ Authorized Signer Only
X
Date

NEW ACCOUNT INFORMATION

Date: **04/02/2009**

Opened by: **Terence Steffen**

☒ REPLACEMENT

Thrivent Financial Bank

2000 E Milestone Drive
Appleton, WI 54919-0001
Lyndale

ACCOUNT INFORMATION

Title of Account(s):
Lois M Overland
Douglas & Lois Overland Tr Dtd 5/23/03
Carol A Overland-POA
3535 Bryant Ave S Apt # 417
Minneapolis, MN 55408-4133

Account Type:	Account Number: **00204010087**
Account Type:	Account Number:
Account Type:	Account Number:
Account Type:	Account Number:

Account TIN: **472-16-2246**

OWNERSHIP TYPE **Trust**

Words, numbers or phrases preceded by a ☐ are applicable only if the ☒ is marked.

BUSINESS ENTITY INFORMATION

Business Name: **Douglas & Lois Overland Tr Dtd 5/23/03**

Business Address:
3535 Bryant Ave S # 417
Minneapolis, MN 55408-4133

Assumed Name if DBA:

Nature of Business:

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\# OF SIGNATURES REQUIRED: 1

☐ Authorized Signer Only	☐ Authorized Signer Only
X	X Carol A Overland
Lois M Overland Date	**Carol A Overland** Date
☐ Authorized Signer Only	☐ Authorized Signer Only
X	X
Date	Date