

THE LENO INDIVIDUAL RETIREMENT ENROLLMENT APPLICATION

1) ACCOUNT OWNER

<input type="text"/>	<input type="text"/>	<input type="text"/>		
First Name	Middle	Last Name		
Date of Birth: (dd/mm/yy)	Passport Number:	Phone (H)	Phone (W)	Occupation:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Address				Country
<input type="text"/>				<input type="text"/>
P.O. Box	Fax Number	Email Address		
<input type="text"/>	<input type="text"/>	<input type="text"/>		

2) JOINT ACCOUNT OWNER

<input type="text"/>	<input type="text"/>			
First Name	Last Name			
Date of Birth: (dd/mm/yy)	Passport Number:	Phone (H)	Phone (W)	Occupation:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

BENEFICIARY (AGREEMENT NUMBER _____) FOR OFFICE USE ONLY

<input type="text"/>	<input type="text"/>	<input type="text"/>		
First Name	Last Name	Relation To Account Holder		
Date of Birth: (dd/mm/yy)	Passport Number:	Phone (H)	Phone (W)	Occupation:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Address (IF Different than Account Holder) <input type="text"/>				
Initial Deposit: \$_____ Standard Deposit: \$_____ Years Term:_____				

PAYMENT REQUIRED WITH APPLICATION

Expected Total of All Deposits: \$_____ Standard Deposit Type: ☐ monthly ☐ annually ☐ semiannual ☐ quarterly

Please indicate Investment Option:

☐ Conservative ☐ Balanced ☐ Aggressive ☐ Custom Choice

If Custom Choice Outline Specifics

The undersigned applicant(s) hereby applies to The Leno Individual Retirement Account and acknowledges the following that:

- 1) This application, shall become part of The Individual Retirement Account Agreement when executed, and
- 2) An annual fee of \$50 will be deducted quarterly in arrears
- 2) A copy of this application, when completed, properly dated and signed by the authorized representative is receipt of initial deposit
- 3) The undersigned received a copy of the Leno Individual Retirement Plan Agreement and agrees to the terms

I/We HEREBY DECLARE that the information given in this document is true correct and complete in every respect and understand and agree that The Leno Individual Retirement Account Agreement is being entered into based on the accuracy of the information on this application and the terms of The Leno Individual Retirement Account Agreement of which it forms a part.

Account Owner (1)

Account Owner (2)

Date Signed (DD/MM/YY)