

Secured Party Creditor Necessary Information for Filing

Please print clearly so your agent can transcribed the information correctly

DEBTORS NAME: _____

DEBTORS Address: _____

Birth Date: ___ / ___ / _____ (mm/dd/yyyy)

Social Security No.: _____

E-Mail Address: _____

(This is a must! You or your contact must have an e-mail address)

Phone: (____) _____ - _____

Name of Second Trustee, this is a co-trustee that will also have access to help manage the trust estate. It is very important to trust this man/woman:

Name of Exchanger (this is a person that is to hand the property from the creator to the trustee, theoretically speaking): _____

Address of the Exchanger: _____

Secured Party's Name: _____

SPC's Address: _____

Name of all Beneficiaries (this is the person or people you will be acting on behalf of, usually an ideal beneficiary is a child or your children):

Additional Property to be entered into trust. This can be tangible and intangible property (Specific and Realistic):

Other Authorized Agents Acting on your behalf, this includes "Your Acting Agent" if you are using them to have your Notarizations done, or family members or friends you will allow this information to be discussed with. (Please not information will not be released to any party unless they are listed here!)

Name: _____ Ph: _____

Name: _____ Ph: _____

Name: _____ Ph: _____

Name: _____ Ph: _____

Name: _____ Ph: _____

Would you like us to obtain an EIN for the DEBTOR? YES NO

Additional Documents needed for the Becoming a Secured Party Creditor process:

① An original of the "Certificate of Live Birth (Long Form)"

(If you do not have a copy it can be obtained at the Vital Statistics office for the State you were born in.)

The exchanger and witnesses are very minor roles, while the trustees are major rolls that should be taken seriously. Think very long and hard about who you trust to act as co-trustee. As well the second trustee will have to also be available when opening an account at a bank when and if you choose to do so.

If referred to SFS who was it by?

Name: _____

Phone or E-mail: _____

POWER OF ATTORNEY BETWEEN PRINCIPAL AND AGENT

The undersigned, a natural man known as (Name here) _____, as principal, an inhabitant on the Land in the original jurisdiction of the (State here) _____ Republic, does hereby designate Sovereign Filing Solutions as attorney in fact for the principal, to act in the following capacity in behalf of the principal.

- 1) The attorney in fact shall have the limited power to sign the principal's name to certain documents as if the principal himself were signing on said documents. The documents, upon which the attorney in fact shall have authority to sign the principal's name, are limited in scope to the following: Security Agreement, Hold Harmless Agreement, Private Agreement as well as various "Acceptances for Value" on commercial documents and various necessary filings, and documents included in the Secured Party Creditor Process.
- 2) This special power of attorney shall become effective immediately and shall remain in effect until the documents are prepared or until revoked or terminated as specified in paragraph 3 or extended as specified in paragraph 4.
- 3) This power of attorney may be revoked, suspended or terminated in writing by principal with written notice to the designated attorney in fact.
- 4) This power of attorney may be extended as necessary by written authorization of principal with written notice to the designated attorney in fact.
- 5) The designated and acting attorney in fact and all persons dealing with the attorney in fact shall be entitled to rely upon this power of attorney so long as neither the attorney in fact nor any person with whom he was dealing at the time of any act taken pursuant to this power of attorney, had received actual knowledge or actual notice of any revocation, suspension, or termination of the power of attorney by death or otherwise. Any action so taken, unless otherwise invalid or unenforceable, shall be binding on the heirs, devisees, legatees or personal representatives of the principal.
- 6) The estate of the principal shall hold harmless and indemnify the attorney in fact from all liability for acts done in good faith and not in fraud of the principal.
- 7) The laws of The State of Michigan shall govern this power of attorney.

This power of attorney is signed on this _____ day of the month _____, AD 201_ to be effective immediately.

Located at: _____

(This is your address.)

Signature: _____

Principle

Print Name: _____

First Witness Signature

Print Name: _____

Location at: _____

Second Witness Signature

Print Name: _____

Location at: _____
