

A/c 44133317

Deutsche Asset & Wealth Management



# Deutsche Bank Trust Company Americas (DBTCA) Business Deposit Account Opening Application

Darren K. Indyke PLLC - Attorney Trust Account 8/6/2008  
Account Title Date of Incorporation

Darren K. Indyke PLLC - Attorney Trust Account 30-0603048  
Entry/Company Name Taxpayer ID Number (TIN)

575 Lexington Avenue, 4th Floor  
Mailing Address

New York NY 10022  
City State Zip Code

212 971 1314 882 485 8316  
Business Telephone Number Business Fax Number Other Number

Legal Address (if different from mailing address)

City State Zip Code

## Client Relationship

- Corporation
- Foundation
- Non-Profit Organization
- Limited Liability Company (LLC)
- Partnership
- Limited Liability Partnership (LLP)
- Attorney Escrow Account
- Landlord Master Escrow
- Trust/Estates

## Private Wealth Premium™ Elite Business Accounts

- Checking Account
- Checking with Interest  
(Foundation and Non-profit only)
- Money Market Deposit
- Cash Master Sweep Account

Target Amount Trigger Amount

DBTCA Certificate of Deposit

APY Term

DB AG NY Preferred Certificate of Deposit

APY Term Promo term

(DBTCA deposit account required, along with a DB AG Preferred Terms and Conditions)

## Private Wealth Premium™ Banking Services

- Deluxe Checkbook
- Name Only  Name and Address

Style Code Color

## Internet Banking Services

- DB Private Wealth Online Plus
- Link to existing online relationship:  
1030880

Debit Cards—Business Debit Card

## Duplicate Statement

Name

Address

City

State

Zip Code



NA05000019079-000142233  
WM134871 075824 072813

SDNY\_GM\_00038564

# CONFIDENTIAL

CONFIDENTIAL – PURSUANT TO FED. R. CRIM. P. 6(e)

DB-SDNY-0001388

EFTA\_00149173

EFTA01282953

## Notice of Customer Identification Policy

### Important Information

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify and record information that identifies each person who establishes an account, investment or other business relationship with a financial institution. This means that we will ask for your name, address and other information that will allow us to identify you. We may also ask to see identifying documents such as a certificate of formation or good standing (legal entities) or a passport or other photo identification (individuals).

### 3rd EU Notice

Governmental rules have also broadened the scope of the Bank's obligations to aid in the fight against money laundering and terrorist financing; these rules call for an active involvement of both asset management firms and their clients. For new and existing clients we currently have a legal obligation to ask our customers questions regarding their identities, addresses, source of funds and, if necessary, legal representatives, authorized signatories, beneficial owners or control structures and to collect requisite documentation to substantiate the information. Also, enhanced anti-money laundering requirements require that should any of the above personal or institutional information change, our clients would be obliged to immediately notify us of the change(s) and provide us with relevant documentation to verify these changes.

### ATM/Debit Service

You agree that the retention or use of the ATM/Debit card constitutes acceptance of the terms and conditions of the Cardholder Agreement contained in the Terms and Conditions of Deposit Accounts.

### Internet Banking Service

If you have selected to receive Internet Banking Services, you understand that you will be required to enter into a separate Internet Banking Services Agreement with DBTCA before you can access the Internet Banking Service.

### Acknowledgement of Receipt of Privacy Notice

By signing below, you acknowledge receipt of DBTCA's Privacy Notice included in the Application Package.

### Telephones, Facsimile or E-mail Instructions

By signing below, you agree that from time to time you may give instructions by telephone, facsimile or e-mail regarding the above captioned account(s) (defined herein as "Verbal Instructions"). It is understood that the risk of Verbal Instructions being given by person or persons purported to be you is your own. Absent the gross negligence or willful misconduct of DBTCA, you agree to indemnify and hold harmless DBTCA for any claims, losses, expenses, costs or attorneys' fees resulting from DBTCA's acting upon such misunderstood and unauthorized Verbal Instructions. You understand that DBTCA may, but shall not be required to, seek verification of your verbal, facsimile or e-mail instructions by call back. In case of doubt, DBTCA may in its sole discretion refuse to execute your Verbal Instructions or any part thereof, without incurring any liability. DBTCA is under no obligation to execute your Verbal Instructions to transfer funds or securities to any account(s) without written instructions bearing your original signature.

### Non-U.S. Organizations:

#### Confirmation of Tax and Compliance Responsibilities

You confirm that it is your responsibility to fulfill any tax obligations and any other regulatory reporting duties applicable to it in any relevant jurisdictions that may arise in connection with assets, income or transactions in your account(s) and your business relationship with DBTCA. Furthermore, you confirm that the necessary information (to the best of your knowledge and capabilities) is made available no less than annually to the relevant beneficial owner(s), settlor(s), beneficiary(ies), partner(s), etc., to enable him/her/them to fulfill any respective tax obligations that may arise for him/her/them in connection with your business relationship with DBTCA.

Please complete and attach separate W-8 or W-9 documentation as applicable.

#### Terms and Conditions and Representations

By signing below, you acknowledge receipt of the Terms and Conditions for Deposit Accounts attached to this Application and agree to be bound by them. In addition, you agree to notify us immediately of any material change to the information provided by you on this Application.

You represent and warrant that all of the information provided by you on this Application is accurate.

The Terms and Conditions for Deposit Accounts are subject to change.

**CONFIDENTIAL**

**Acceptance**

You understand that this application is subject to acceptance by DBTCA.

*David K. Deagle*  
Authorized Signer

4-27-15  
Date

Authorized Signer

Date

**For Bank Use Only**

Reviewed by:

*[Signature]*  
Signature

Amanda Kirby  
Name

Associate  
Title

4/27/15  
Date

Accepted by DBTCA:

*[Signature]*  
Signature

Paul Morris  
Name

MD  
Title

4/27/15  
Date

Account numbers:

EOA \_\_\_\_\_ NOW \_\_\_\_\_

MMOA \_\_\_\_\_ CD/BAG \_\_\_\_\_

**CONFIDENTIAL**