

Dear Loan Applicant:

Congratulations in taking a momentous step toward your business goals! Taking the next step into financing the business proposition is important in making your dreams come true. We know you have other financing options so we want to thank you for considering a business that gives back to the Seneca community. We take great ownership in helping the Seneca community foster local economic development through our loan products. Moreover, we are able to assist our clients with improving their credit scores by reporting their payment history to the credit bureaus. We will review your completed loan application and tailor a loan product to the needs of your business and offer competitive interest rates on our business loans.

SNIEDC is pleased to announce that the organization received official certification as a Community Development Financial Institution (CDFI) from the U.S. Department of the Treasury. A certified Community Development Financial Institution (CDFI) is a specialized financial institution that works in market niches that are underserved by traditional financial institutions. Thank you for considering SNIEDC for funding your business development project.

If you have any questions regarding the loan application, please feel free to call the SNIEDC office and we will answer any questions that you may have.

Sincerely,

Jonathan A. Zurek, SNIEDC

Executive Director

LOAN APPLICATION PROCESS

LOAN APPLICATION PROCESS:

- 1. Develop a Business Plan.
- 2. Choose the loan product that best suits your business need.
- 3. Complete our Loan Application (Co-applicants must complete Appendix A).
- 4. Collect all the necessary documentation as described on the Checklist provided with the application
- 5. Submit all your application materials and documentation to the SNIEDC Office.
- 6. SNIEDC will determine your creditworthiness by checking your credit score and report.
- 7. Your application and documentation will go to the SNIEDC Loan Committee for review and interest rate determination.
- 8. The Loan Committee will recommend approval, denial, or request more information to the Board of Directors. The SNIEDC Board of Directors will make the final determination.

PURPOSE OF REQUESTING A BUSINESS PLAN

Business development and maintaining a successful business requires planning. A written plan is helpful in anticipating problems and developing strategies for avoiding or minimizing problems. Today, all lending institutions and investors ask for a Business Plan that enables them to make decisions on the applicant's ability to make a profit and repay the loan. In order for the SNIEDC Board to make responsible decisions regarding business loans, sufficient information needs to be submitted which will assist the Board in making these decisions.

A business plan is a formal document detailing the goals of a business and how they will be achieved. The document should include a comprehensive strategy detailing how and why your business will be successful. There are many aspects to consider when starting up your own business, and putting everything down on paper will better prepare you for the development of your new business. The Business Plan also shows if there are any high risks involved in the business. In addition the Business Plan will provide you with a "blue print" for your new business.

After the SNIEDC Board reviews the business plan and supporting information, they will be better equipped to identify any risks that are present in the venture plus work with the entrepreneur to minimize those risks.

APPLICATION CHECKLIST

Loan Application – Must be notarized* Business information, requested loan amount, use of loan proceeds and performancial statements	[ersonal]	
Business Plan]]	
Goals, business structure, marketing plan, 3 years of financial projections			
Tax Returns (Business and Personal) – previous three years			[
Copy of your Driver's License, Tribal ID, and Social Security Card			[
Certificate of SNI Enrollment Requested from the Clerk's Office			[
Proof of Seneca Nation Business License Businesses on-territory require a SNI business license, requested at SNI C Office	lerk's		[
Proof of Business Liability Insurance and other necessary insurance A copy of your Confirmation of Coverage	[]	
Authorization to Release Information Forms For SNIEDC to obtain financial information from Housing, Mortgage and	[l Courts]	
Designate Other Recipient Release of Information Form (optional) For SNIEDC to discuss your account with a designated individual	[]	
Voluntary Assignment of Annuity Payment Form *Notarized* (optional) Used for repayment of loan or in the event of payment delinquency/default	;]	
Media Release Form (optional) To allow SNIEDC to use your business in our advertisements	[]	
Co-Applicants (if you have a co-applicant)			
Appendix A- Application (Signed)	[If Applicable]]
Tax Returns (Business and Personal) - last three years	[If Applicable]]
Copy of Tribal ID, driver's license, and Social Security Card	[If Applicable]	[]
Certificate of SNI Enrollment	[If Applicable]	[]
Purchase Quote or Agreement			
If business/equipment is being purchased with loan proceeds		[]
Collateral Valuation (Invoices, appraisals, etc.)		[]
*A Notary is available at the SNIEDC office as well as the SNI Clerks Office			

COLLATERAL CHECKLIST

If you are using personal property or property that you are purchasing with your SNIEDC loan proceeds as collateral, include the following items as they may be necessary to secure the collateral.

EQUIPMENT

Title (Vehicles)	[]
Equipment Identification (Brand, Model, Serial #)	[]
Vendor Quotes – if equipment is being purchased with loan proceeds Invoice, purchase quote, detailed description	[]
Appraisal – if necessary	[]
MORTGAGE	
Deed	[]
Survey	[]
Estoppel Certificate (Requested from SNI Lease Administration)	[]
Title Search	[]
Property Appraisal	[]



SNIEDC LOAN APPLICATION

BUSINESS INFOR	RMATION		
Name of Business Company Address City, State, Zip Telephone Website Business Description		[] Partnership Year [] Corp. /LLC Year State	
Company Officers Name	(Attach additional listing if necessary) Position	Company Principals (Shareholders/Partners) Name % of Inter	rest
APPLICANT INFO	RMATION	(Co-Applicants must complete Appen	dix A)
Name		S.N.I. Tribal Roll #	
Personal Address		Social Security #	
City, State, Zip		Date of Birth	
Telephone		Email	
		yes, explain:	
LOAN REQUEST			
Amount Requested: Purpose of Financing:	\$ Term Requested:	5 year maximum on Micro loans (under \$50,000) 7 years maximum on Business Loans (\$50,000 - \$250,	,000)
Source of Repayment:			
Are you current with any	y debt with the Seneca Nation programs?	[]Yes []No
Would you be willing to	sign a Voluntary Assignment of Annuity Payment	form? []Yes []No
Would you like your Vol	untary Assignment of Annuity to pay on your loan]No 1 of 9

PROJECT COSTS			SOURCE	S OF FUND	S	
Property Acquisition:	\$			o or rond		
Renovations:	\$					
Machinery/Equipment:	\$			s·		
Professional Fees:	\$			o. ncumbered Asse		
Working Capital:	\$			ontribution (Cas	· ·	
New Construction:	\$,	,	
				1	Otal: \$	
Acquire Existing Business: Refinance Existing Debt:	\$			Oth on		
	\$					
Inventory						_
Materials/Supplies						
Other (Describe):						
Total:	\$		_			
COLLABORAL (c						
COLLATERAL (including	purchases with loai	1 proceeds)				
Description (Address if real esta model, serial #, VIN #, etc.)	ate, make,	Make Year	Original Cost	Market Value	Current Lien Balance	Name Lienholder
			\$	\$	\$	
			¢	\$		
			. ————————————————————————————————————			
			\$	\$	 \$	
			\$	\$	\$	
EMPLOYMENT PROJ	ECTIONS					
How many employees will be h	nired and/or retaine	d as a resu	lt of obtaining S	SNIEDC financii	ng?	
Total # of new employees (New employees to be hired as obtaining SNIEDC financing)	a result of			Of the total of	f new employees how m	any are
Total # of employees retained				Native Ameri	icaii:	
(Current employees that will be of obtaining SNIEDC financing	kept as a result			Of the total of Native Ameri	f employees retained hovican?	w many are
Total # of employees working	for your company					
as a result of receiving financing						
Of th	e total # of employe	es hired an	d/or retained a	s a result of rec	eiving financing:	
How	many will be full-ti	ime?	How m	any will be part	-time?	
PROFESSIONAL SERV	ICE PROVIDER	RS				
CON'	TACT NAME		FIRM/BUSIN	NESS NAME	PHONE	NUMBER
Attorney						
Insurance						
Accountant						
Banker						

PERSONAL FINANCIAL INF	CORMATIO	N				
Present occupation			Present employer			
Years at current job		years	Salary	\$		_/ year
Present employer contact info						
Provious assumption	Street		City	State	Zip	Phone#
Previous occupation if less than 3 years at current job_			Previous employer			
Salary	\$	/ye	ar			
Previous employer contact info						
	Street		City	State	Zip	Phone#
ASSETS	3			LIABILI	ΓIES	
Cash on hand & in Banks	. \$		Accounts Payable		\$	
Savings Accounts	. \$		Notes Payable to Banks and (Describe in Section 2)	d Others	\$	
IRA or Other Retirement	\$		Total Installment Accounts	(Auto)	\$	
Account			Mo. Payments \$			
Accounts & Notes Receivable	\$		Installment Account (Credi Loans, please list all)			
			Mo. Payments \$			
Life Insurance-Cash Surr Value Only (complete in Section 8)	. \$		Loan on Life Insurance		\$	
Stocks and Bonds (do not list assets held in retirement or IRA accounts)	\$		Mortgages on Real Estate. (Describe in Section 4)		\$	
(Describe in Section 3)						
Real Estate	\$				\$	
(Describe in Section 4) Automobile - Present Value	\$		(Describe in Section 6) Other Liabilities		¢	
rationiophe Tresent value	Ψ		(Describe in Section 7)		Ψ	
			Mo. Payments \$		-	
Other Personal Property(Describe in Section 5)	. \$		Total Liabilities		\$	
Other Assets	\$		Net			
(Describe in Section 5	,		Worth			
Total	\$			Total.	\$	
Section 1. Sources Of Income			Contingent	Liabilities		
Salary	\$		As Endorser or Co-Maker		\$	
Net Investment Income	\$		Legal Claims & Judgments.		\$	
Real Estate Income	\$		Provision for Federal Incom	ne Tax	\$	
Other Income (Describe below)*	\$		Other Special Debt		\$	
Description of Other Income in Section 1.						

 $[*]A limony\ or\ child\ support\ payments\ need\ not\ be\ disclosed\ in\ "Other\ Income"\ unless\ it\ is\ desired\ to\ have\ such\ payments\ counted\ toward\ total\ income.$

Section 2. Notes Payable to B. (Use attachments if necessary. E		st be identified as pa	rt of this sta	itement and	d signed.)			
Name & Address of Noteholder(s)	Original Balance	Current Balance	Payment		_	(monthly, etc.)	What was us	ed for collateral?
			-					
Section 3. Stocks and Bonds (Use attachments if necessary. E	Each attachment mu	st be identified as a 1	part of this s	tatement a	nd signed.)			
Number of Shares Name of S		•	ket Value Qu		_	Date of Quotation	n/Exchange	Total Value
								_
Section 4. Real Estate Owned (List each parcel separately. Use	attachments if nece	essary. Each attachm	ent must be	identified	as a vart of th	is statement and s	sioned).	
	,	PROPERT		,		PERTY B	8	PROPERTY C
Туре	e of Property _							
	Address _							
Dai	te Purchased _							
C	Original Cost _							
	Iarket Value _							
Name & Address of Mort							_	
Mortgage Acco								
	gage Balance _							
Amount of Payment per	-							
	of Mortgage _	A t-						
Section 5. Other Personal Pro (Describe, and if any is pledged as sec			amount of lien	ı, terms of pa	yment, and if	delinquent, describe	delinquency).	
Section 6. Unpaid Taxes	1 11 1	1	1 . 1 .		, 1:	((1)		
(Describe in detail, as to type, to	wnom puyabie, wn	en aue, amount, and	to wnat pro	perty, if ar	iy, a tax iien	attacnes).		
		1.11	,, , , , , , ,					
Section 7. Other Liabilities (<i>Describe in detail</i>).	including alimony,	cnıld support, separ	ation maint	enance, etc	.)			
Section 8. Life Insurance He								
(Give face amount and cash surr	render value of polic	ries - name of insura	nce company	y and benej	iciaries).			

If the answer to any of the following questions is yes, attach a written explanation:		
Have you or your business ever declared bankruptcy? (if yes circle one below)	Yes	No
Present Status: Case Dismissed Payment Plan Debts Discharged (amt: \$)	Pending	
Have you or your business experienced foreclosure, repossession, debt judgment or criminal penalty in the last seven years?	Yes	No
Are there any legal actions (claims, lawsuits, etc.) pending against you or your business?	Yes	No
Are you or your business past due on any tax obligations?	Yes	No
Are you or your business delinquent on any loans?	Yes	No
Have you or your business been declared in default on any loans?	Yes	No
Are there currently any unsatisfied judgements against you or your business?	Yes	No
Are you a co-maker, endorser, or guarantor on any loan contract?	Yes	No
Have you ever been charged with or convicted of any felony or misdemeanor other than traffic offenses, or been in the management of any firm or corporation convicted of a felony?	Yes	No
Have you or your business been cited for any violation of Federal, State, Local, or Tribal Laws or regulation with respect to labor practices, hazardous wastes, environmental pollution, or other operating practices?	Yes	No
If the answer to any of the questions is yes, attach a written explanation here:		

DECLARATIONS

I (we) authorize SNIEDC to order credit reports, and/or other financial background information on my (our) personal and business financial backgrounds. I (we) authorize disclosure of all information submitted in connection with this application to any financial institution in consideration of any assistance that may be provided.

I (we) attest that to the best of my (our) knowledge, information, and belief, the information contained in the foregoing application is correct and true.

If Applicant is a sole p sign below.	roprietorship or partnership,	If Applicant is a corporation sign below.			
Applicant Printed Name an	nd Title	Name of Corporation			
Signature	Date	Authorized Signature	Date		
Co-Applicant Printed Name	and Title	Printed Name and Title			
Signature	Date				
APPLICAT	ION COMPLETE				
SNIEDC Office	•	Date			
STATE OF NEW YORK COUNTY OF))				
		before me, the undersigned, a Notar	y Public in and for the State,		
same in his/her/their capaci	ne(s) is (are) subscribed to the with	known to me or proved to me on the basin instrument and acknowledged to me to gnature(s) on the instrument, the individual	hat he/she/they executed the		
Notary Public					

APPENDIX A. CO-APPLIC	ANT INFORMATIO	N		
Name of Co-Applicant				
Co-Applicant Address				
City, State, Zip				
			FAX	
Social Security #				
PERSONAL FINANCIAL INF				
Present occupation_		Present employer		
Years at current job	years	Salary	\$	/ year
Present employer address				
Previous occupation	Street	City	State Zi _ļ	Phone#
if less than 3 years at current job_		Previous employer		
Previous employer address				
	Street	City	State Zip	
ASSETS			LIABILITIES	
Cash on hand & in Banks	\$	Accounts Payable		\$
Savings Accounts	\$	Notes Payable to Banks an (Describe in Section 2)	nd Others	\$
IRA or Other Retirement	\$			\$
Account		Mo. Payments \$_		
Accounts & Notes Receivable	\$	Installment Account (Credi Loans, please list all)		\$
		Mo. Payments \$ _		-
Life Insurance-Cash Surr ValueOnly (complete in Section 8)	\$	Loan on Life Insurance		\$
Stocks and Bonds (do not list assets held in retirement or IRA accounts)(Describe in Section 3)	\$	Mortgages on Real Estate (Describe in Section 4)		\$
Real Estate(Describe in Section 4)	\$	Unpaid Taxes(Describe in Section 6)		\$
Automobile - Present Value	\$	Other Liabilities(Describe in Section 7)		\$
		Mo. Payments \$ _		
Other Personal Property(Describe in Section 5)	\$	Total Liabilities		\$
Other Assets(Describe in Section 5	\$	Net Worth		\$
Total	\$		Total	\$
Section 1. Sources Of Income		Contingent	Liabilities	
Salary	\$	As Endorser or Co-Maker		\$
Net Investment Income	\$	Legal Claims & Judgments.		\$
Real Estate Income	\$	Provision for Federal Incom	ne Tax	\$
Other Income (Describe below)*	\$	Other Special Debt		\$
Description of Other Income in Section 1. (A	limony or child support need not be a	disclosed unless it is desired to ha	ve such payments cou	nted toward total income.)

Section 2. Notes Payable to E (Use attachments if necessary.		ust be identified as pa	art of this statement an	d signed.)	
Name & Address of Noteholder(s)	Original Balance	Current Balance	Payment Amount	Frequency (monthly, etc.)	What was used for collateral?
Section 3. Stocks and Bonds (Use attachments if necessary.	Fach attachment m	ust he identified as a	nart of this statement a	nd cioned)	
Number of Shares Name of		-	ket Value Quotation/Exch		Exchange Total Value
Section 4. Real Estate Owned		accome Fach attacker	want much baid antified	as a want of this statement and si	out of land
(List euch purcei separatety. Use	e attacnments if nec	essary. Each attachn PROPER	-	as a part of this statement and si PROPERTY B	PROPERTY C
Тур	e of Property				_
	Address				
Da	ite Purchased				_
	Original Cost _				
Present N	Market Value				
Name & Address of Mor	tgage Holder				_
Mortgage Acco					_
	gage Balance _				
Amount of Payment pe					
	of Mortgage				
Section 5. Other Personal Pr (<i>Describe, and if any is pledged as se</i>	roperty and Othe: ecurity, state name and	r Assets l address of lien holder,	amount of lien, terms of p	ayment, and if delinquent, describe d	elinquency).
Section 6. Unpaid Taxes					
(Describe in detail, as to type, to	o whom payable, wh	ien due, amount, and	d to what property, if an	ıy, a tax lien attaches).	
Section 7. Other Liabilities (<i>Describe in detail</i>).	(including alimony	. child support, sepa	ration maintenance, etc	2.)	
Section 8. Life Insurance He					
(Give face amount and cash sur	render value of poli	cies - name of insura	ince company and bene	ficiaries).	

If the answer to any of the following questions is yes, attach a written explanation:		
Have you ever declared bankruptcy? (if yes circle one below)	Yes	No
Present Status: Case Dismissed Payment Plan Debts Discharged (amt: \$)	Pending	
Have you experienced foreclosure, repossession, debt judgment or criminal penalty in the last seven years?	Yes	No
Are there any legal actions (claims, lawsuits, etc.) pending against you?	Yes	No
Are you past due on any tax obligations?	Yes	No
Are you delinquent on any loans?	Yes	No
Have you been declared in default on any loans?	Yes	No
Are there currently any unsatisfied judgements against you?	Yes	No
Are you a co-maker, endorser, or guarantor on any loan contract?	Yes	No
Have you ever been charged with or convicted of any felony or misdemeanor other than traffic offenses, or been in the management of any firm or corporation convicted of a felony?	Yes	No
Have you been cited for any violation of Federal, State, Local, or Tribal Laws or regulation with respect to labor practices, hazardous wastes, environmental pollution, or other operating practices?	Yes	No
If the answer to any of the questions is yes, attach a written explanation here:		



MICRO LOAN BUSINESS PLAN

Fill in the information that is relevant to your business

Business Information

1.	Name:
2.	Business Name:
3.	Business purpose:
4.	I have been in business since or plan on starting on:
5.	Manager(s) of the company will be:
6.	My experience as an owner is:
7.	Degrees or Certifications I have related to my business:
8.	My business is seasonal? Circle one: YES NO
9.	If yes to question 8, which seasons? Circle all that apply: Winter Spring Summer Fall
Produc	cts and Services
10.	The products or services I sell are:
11.	The research I've done for my business has been:
	<i>y</i>

The Industry, Competition, and Market

12.	I consider my competition to be:	
13.	How I will measure against the competition:	
14.	Some of the trends I see in my industry are:	
15.	Some potential areas I see for growth are:	
16.	. My typical customers have these characteristics in common:	
	ing Plan ng should address the four P's (Product, Price, Placement and Promotion)	
17.	My product or service is:	
18.	My pricing/sales price is, or I determine it by:	
19.	The places I will sell my product or service are:	
20.	I will promote my product or service by:	
21.	My competitive advantage is (why buy from me?):	
22.	I will distribute my product or service by:	
23.	My use of advertising will consist of:	
24.	I will get feedback from my customers by:	

Operating Plan

25.	My experience with my product or service is:
26.	I will be involved with the business by completing the following duties:
27.	Any special equipment I need for my business would include:
28.	If I need to hire new employees, I will need to hire these new positions:
20	I will a weide the fellowing bounding to a second and
29.	I will provide the following benefits to my employees:
30.	If purchasing an existing business, what changes I am considering for the business:
20.	
SWOT	Analysis
31.	The strengths of my business are (internal characteristics):
32.	The weaknesses of my business are (internal characteristics):
33.	I see the following opportunities for my business (external characteristics):
24	Lace the following threats (shallowess) for my bysiness (sytemal share storistics).
34.	I see the following threats (challenges) for my business (external characteristics):
Financ	ials
35.	The assumptions I am using to create my financials come from:
36.	If I am short of money for my project, I can get more from:

Start-up Costs

Every company has different start-up costs depending on their business model. This section of the document is intended to guide you through the costs associated with start-up. Not everything will apply to your business model. Fill in your costs for what is relevant to your business and provide any additional items you may think necessary!

If you are building a new property, or are purchasing an existing property you will have:

Land: \$
Building: \$
Renovations: \$
Signage: \$
If you are renting, you may have:
Renovations: \$
Signage: \$
In all cases, the following may be part of your start-up expenses:
Working capital: \$
Equipment (business): \$
Equipment (office): \$
Furniture: \$
Fixtures (storage shelves, displays, etc.): \$
Initial Inventory: \$
Cost to organize: \$
- SNI Business License
- Business formation (consultation with an attorney if needed)
- Marketing
 Logo development Website Business cards

4. Initial marketing campaign

Income Statement Years 1-3

Payanua	First Voor	Second Year	Third Voor
Revenue	First Year	Second fear	Third Year
Product 1			
Product 2			
Product 3			
Product 4			
Product 5			
Product 6			
Total Revenue	\$	\$	\$
Cost of Goods Sold			
Product 1			
Product 2			
Product 3			
Product 4			
Product 5			
Product 6			
Total Cost of Goods Sold	\$	\$	\$
Gross Margin	\$	\$	\$
Payroll			
Operating Expenses			
Advertising			
Car and Truck Expenses			
Commissions and Fees			
Contract Labor (Not included in payroll)			
Insurance (other than health)			
Legal and Professional Services			
Licenses			
Office Expense			
Rent or Lease Vehicles, Machinery, Equipment			
Rent or Lease Other Business Property			
Repairs and Maintenance			
Supplies			
Travel, Meals and Entertainment			
Utilities			
Miscellaneous			
Other Expense 1			
Other Expense 2			
Total Operating Expenses	\$	\$	\$
Income (Before Other Expenses)	\$	\$	\$
Other Expenses			
Amortized Start-up Expenses			
Depreciation Depreciation			
Interest			
Commercial Loan			
Commercial Mortgage			
Credit Card Debt			
Vehicle Loans			
Other Bank Debt			
Line of Credit			
Bad Debt Expense			
Total Other Expenses	\$	\$	\$
Net Income Before Income Tax	\$	\$	\$
Income Tax	+_		
Net Income/Loss	\$	\$	\$



<u>AUTHORIZATION TO REL</u>EASE INFORMATION TO NATION ENTITIES

I/We have applied for a business loan from Seneca Nation of Indians Economic Development Company (SNIEDC). As part of the application process, SNIEDC may verify information contained in my/our business loan application and in other documents required in connection with the loan, either before the loan is closed or as part of its quality control program.

I/W e authorize you to provide SNIEDC all information and documentation that they request. Such information includes, but is not limited to, employment history and income; bank, money market, and similar account balances; credit history; mortgage balances; and copies of income tax returns.

A copy of this authorization may be accepted as an original.

Your prompt reply to SNIEDC is appreciated.

Furthermore, I/We grant SNIEDC permission to release information necessary in assisting me in obtaining other services for which I may be eligible.

This release of information is good for one year from the date signed.

Borrower (sign):	Date:	
Borrower (print):	<u> </u>	
Co-Borrower (sign):	Date:	
Co-Borrower (print):		



DESIGNATE OTHER RECIPIENT RELEASE OF INFORMATION FORM

	Loan #:		
Authorization Form to Release Information to (Recipient/Entity)			
Recipient/Entity Name:	Relationship:		
Recipient/Entity Address:	Telephone #:		
Company ("SNIEDC") to share, release, disindividual/entity, any and all public and non-public the Borrower(s), in SNIEDC's possession or to include, but is not limited to: name, address, teleploan status, account balances, and payment active from the result of SNIEDC's experience with the I statements, in consumer, business or commercial forms, or wherever and however such information. The Borrower(s) agrees that, SNIEDC shall havidentity of the Recipient, and releases and holds a liability whatsoever related to, in connection with this authorization.	ve no obligation or responsibility whatsoever to verify the SNIEDC harmless from any and all claims, responsibility or the or arising out of SNIEDC's release of information under		
	ated recipient/entity can access, please detail below:		
Borrower (print):	Co- Borrower (print):		
	Co- Borrower (sign):		
SNIEDC – De	esignate Other Recipient Release of Information Form 1 of 1		



Loan #:		
LI CULL II I		

SENECA NATION OF INDIANS ECONOMIC DEVELOPMENT COMPANY VOLUNTARY ASSIGNMENT OF ANNUITY PAYMENTS

Recitals:

WHEREAS, the Seneca Nation of Indians Economic Development Company (SNIEDC), PO Box 437, Salamanca, Seneca Nation, New York 14779, has been established by the Nation in accordance with the Constitution of the Seneca Nation; and is the responsible unit of the Seneca Nation for purposes of business loan financing and regional and economic development;

NOW, THEREFORE, the undersigned Nation Member hereby voluntarily assigns his or her Annuity Distribution hereafter payable to Undersigned by the Nation for the purpose of administratively facilitating payment with respect to the Undersigned's obligations to the Seneca Nation of Indians Economic Development Company on the Note and Business Loan delivered by Undersigned to the Seneca Nation of Indians Economic Development Company and for all amendments, modifications, substitutions and extensions thereof (the "Note and Business Loan").

If the Undersigned is in default of any payment or monetary obligation under the Note and Business Loan, subject to any notice or grace period provided in the Note and Business Loan, without further notice to Undersigned the Seneca Nation of Indians Economic Development Company, during such period when this voluntary assignment is in effect, and has not been revoked, may attach and deduct from any Annuity payment(s) thereafter due to the Undersigned the amount of any such indebtedness then in default, including the entire indebtedness in the event of acceleration. This assignment is revocable and shall only remain in effect until the earlier of (i) the revocation of this assignment by the member, in writing; or (ii) the Note and Business Loan being satisfied in full.

Nothing contained in this assignment of Annuity payments shall limit or restrict any right or remedy otherwise available to the Seneca Nation of Indians Economic Development Company with respect to the Note and Business Loan, including an action for enforcement of the Note or foreclosure of Business Loan.

If you have signed a Voluntary Assignment of Annuity form already or have pledged your annuity as (re)payment to anyone, please list below the Program/Individual whom you have pledged to (re)pay with your annuity and the amount:

Assignee:	
Amount owed:	Amount pledged:
the Terms and Conditions of this Assig legally competent to enter into this Assig protective payee or assigned power of a	read this voluntary Assignment, and understands gnment. The Undersigned verifies that he/she is gnment, and that he/she is without legal guardian, ttorney. By affixing his/her signature below, the enters into this Assignment with the understanding
Print Name	-
Signature	Date
Tribal ID# Social Security #	_
	Subscribed and sworn to me on this day of, 20
	Notary Public, State of My Commission Expires:
Acceptance by SNIEDC	
Signature of Representative Seneca Nation of Indians Economic Development Company	
Date:	