

TRUSTCOMPARE® SUBSCRIPTION FORM

Organizations Name: _____ **Address:** _____

Trust Managers Name: _____ **TRUSTCOMPARE Data Coordinator:** _____

Phone #: _____ Phone #: _____

Fax #: _____ Fax #: _____

Email Address: _____ Email address: _____

TRUSTCOMPARE History:

First Time Subscriber _____

Previously Subscribed Y N Most Recent Year (Data Year) Subscribed _____

Affinity Groups (Check all that apply):

Robert H. Franke & Associates Retainer Client: _____ Ohio Bankers League Trust Association _____
Trust Company(Ind. or Bank Affiliated) _____ Iowa Trust Association Member: _____
Integrated Trust and Brokerage Organization* _____

* Integrated at a level where Trust officers have licenses and representative sell and service Trust accounts.

Soon after we receive this subscription form, we will email the username and password and you can begin your data entry. That email will also provide our service support contact information. We expect to be able to provide the report to the subscribers by Mid- June.

_____ Core Trust Metrics (Level I) \$1500 annual subscription rate

_____ Advanced Business Metrics (Level II) \$4000 annual subscription rate

**For 2008 (Data year 2007) we will be continuing the previous years pricing.
(Level I - \$1000 and Level II \$3500)**

An invoice will be submitted upon receipt of the subscription form.

By your submission of this form, you give Pohl Consulting and Training, Inc. permission to use your subscriber data and/or ratios in compiling peer group composites and range information. Pohl Consulting and Training, Inc. agrees not to disclose the contents of the subscriber data, data accumulation materials, or identity of ratios computed there from, except to the subscribing organization. Pohl Consulting and Training, Inc. will, however, use subscriber data and/or ratios in peer group composites and range information. Composite information and unidentified ratios may and will be used by Pohl Consulting and Training, Inc.

For questions about this subscription form contact:

Loyd Pohl at elpohl@pohlconsulting.com or 800-677-7432 ext 225.

PLEASE FAX THIS COMPLETED FORM TO 630-305-6123