

LOST BOND AFFIDAVIT

P. O. Box 719 Canyon, TX 79015 (800) 486-6888 Fax (806) 655-2490

IMPORTANT INFORMATION! READ BEFORE COMPLETION OF THIS FORM

THE FEE TO REPLACE A LOST BOND CERTIFICATE IS \$10.00 PER BOND.

This form is to be completed if your physical Bond certificate has been misplaced. Lost Acknowledgments of Book Entry do not need to bereplaced. This Affidavit must be completed, signed before a Notary Public and returned to GoldStar Trust Company along with a \$10.00 fee. Furthermore, this document is subject to the terms of the applicable Indenture(s), and to the extent of any conflict between this document and the Indenture(s), the Indenture(s) controls.

LOST BOND INFORMATION		
Name(s) on Bond Register:		
Social Security Number:		
Principal Face Value \$	Maturity Date:	Interest Rate %
Trust Number: Boi	nd Number:	
BOND ISSUER INFORMATION		
Issued by:	Name of Church or Organization	
of:	21, 21	
AFFIDANIT AND CIONATURE	City, State	
AFFIDAVIT AND SIGNATURE		
The State of	The County of	(State & County where being notarized
The undersigned hereby represents to GoldStar Trust Company, as Trustee for the benefit of the bondholders of Issuer (hereinafter "GoldStar"), that the undersigned has been unable to locate the above stated Bond(s). The undersigned hereby requests GoldStar to issue duplicate Bond(s) of the same value and maturity date(s) of the said Bond(s).		
• •	` ,	been sold, assigned, pledged, hypothecated or otherwise owns or claims any interest whatsoever in said Bond(s)
The undersigned further agrees that in the event the original Bond(s) is located, the undersigned shall promptly transmit same to GoldStar for cancellation and shall not make further claim on the Bond(s). The undersigned agrees to indemnify and hold forever harmless GoldStar with respect to any and all claims, costs, damages, expenses and liabilities to which GoldStar is subjected as a result of paying the "called" value of said Bond(s) to the undersigned.		
Signature of First Owner		Signature of Joint Owner (if any)
NOTARY PUBLIC		
Sworn to and subscribed before me this	_day of, 20	<u> </u> .
XNotary Public		Printed Notary Name
My commission expires:		
Date	State of	County of