

Funding Order Form

Please complete this Funding Order Form to retain Simplified Outsource Solutions, LLC's funding services for a client matter. Please note that this Order Form is pursuant to scope of services outlined in the Services Agreement you have signed. By signing and returning this Order Form, you agree you are hiring Simplified Outsource Solutions, LLC for funding services for the client listed below. All fees are non-refundable and due once this work order is accepted.

Date Ordered:					
Law Firm Name:					
Client Name:					
Type of Funding Service: FULL Funding			Funding LITE	Asset Report only	
Trust is:	Revo	cable	Irrevocable		
Trust will:	use Grantor's SSN have own EIN; which is			ch is	
Items to be provide	ded to SOS	to begin funding:			
(Client que	stionnaire (with basi	c vital information)		
I	inancial i	information (comple	ted questionnaire and	complete statements)	
Items to be provide	ded <u>after</u> dr	aft Asset Table provide	ed to law firm:		
A	Affidavit o	or Certificate of Tru	st (Signed copy)		
r S ti	provisions to Special con the client, "o Signing co	o accurately complete f ntact information (i.delient does not use email	e. if we are to work with il", etc.)	eed to reference certain a family member assisting Attorney agent or any other	
			nplified Outsource Solut andable and due upon ex		
Acknowledged B	y:				
Law Firm Representative			D	ate	