



Instructions:

- GE Interest Plus for Businesses is available to businesses in the United States.
- Complete this application, an Authorization Form for Partnerships, and Form W-9.
- Information must be provided about your Partnership *and* about each person who is authorized to act with respect to the investment. Required information from Authorized Persons includes their Social Security number, home address and date of birth. Applications cannot be processed unless this information is provided.
- For Limited Partnerships, you must send in a copy of your Certificate of Partnership with evidence of state filing with this application. For General Partnerships, you must send in a copy of your Partnership Agreement with evidence of state filing with this application.
- You must also include a voided check or a bank statement to verify the linked bank checking or operating account.
- Please print or type all items except signatures. Sign in blue or black ink where indicated on each form.
- For assistance, please contact a Service Representative at **(888) 674-4138** business days from 8:30 a.m. to 7 p.m. ET.

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 or entity who/which opens an account. In certain circumstances, we may obtain and verify this information with respect to any person(s) authorized to effect transactions for your investment. Your investment may be restricted and/or closed if we cannot verify this information.

1. Registration of Your Investment

Official Name of Partnership			Tax Identification Number	
State of Organization	Date of Formation (MM/DD/YYYY)	Business Telephone Number, Including Extension		
Permanent Street Address (P.O. Boxes are not accepted)		City	State	Zip Code

2. Indicate the Nature of Your Business

In the box below, indicate the nature of your business. The nature of your business refers to the type or general category of business or commerce you engage in. Please limit your response to 35 characters.

3. Indicate Your Initial Investment

Your initial investment must be for a minimum of \$500. Your total investment is limited to a maximum, which is currently \$5 million. Funds must originate from a U.S. bank or U.S. branch of a foreign bank and be in U.S. dollars. Money orders, traveler’s checks, starter checks, cashier’s checks, credit card checks, cash and third-party checks are not accepted. **If you are enclosing a check or wiring funds, those funds must be drawn on an account that has the same registration as your GE Interest Plus for Businesses investment.** Your investment check will not be processed until information on this application is verified. Please note: While investments made by mail will begin to earn interest on the date of credit, they are not available for redemption until 7 business days after the check is credited to your investment. Federal Funds wires are available one business day after credit. Funds transferred electronically through the Automated Clearing House (ACH) will typically be completed in 2 to 3 business days and will be available 3 business days after credit.

Check One:

**Please fund my initial investment from the linked bank account I designate in Step 4.**  
GE Interest Plus for Businesses will initiate a transfer via the ACH for the amount you indicate below:  
\$ \_\_\_\_\_

**Enclosed is a check** payable to GE Interest Plus for Businesses for:  
\$ \_\_\_\_\_

**I will be wiring in funds via the Federal Funds wire system.\*** Please establish my investment and then contact me when it is open with wiring instructions.

*\*Please note that if you choose the Federal Funds wire option above, you must fund your investment within 60 days of the establishment date.*

4. Indicate Your Designated Business Checking or Operating Account to Link to Your Investment

To add to and redeem from your GE Interest Plus for Businesses investment, you must designate a bank checking or operating account to be linked to your investment. **Please note that the registration of this bank account must match your GE Interest Plus for Businesses registration.** You will then be enrolled in the Quick Transactions and Wire Redemption Services. To add to or redeem from your investment, you simply initiate a “Quick Invest” or “Quick Redemption” transaction, by automated phone line or via the internet, which transfers money between your bank account and your GE Interest Plus for Businesses investment through the Automated Clearing House (ACH) network. **To verify your business checking or operating account, you must attach a voided check or a copy of a bank statement.**

Business Checking or Operating Account Registration (Must match the registration of the GE Interest Plus for Businesses account exactly.)	
Bank Name and Address	Business Checking or Operating Account Number

Please note that your bank may utilize different routing numbers for ACH transactions and wires. Please confirm with your bank and indicate the appropriate ABA numbers in the space provided below. **Check one:**

My bank uses **one** routing number (ABA) for ACH Transfers and Federal Funds Wires:

Bank Routing Number for ACH Transfers and Federal Funds Wire Transfers

My bank uses different routing numbers (ABA) for ACH Transfers and Federal Funds Wires:

Bank Routing Number for ACH Transfers	Bank Routing Number for Federal Funds Wire Transfers
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## 5. Indicate Your Mailing Address (if different from your registration address in Step 1)

If you prefer to receive mail at an address that differs from your registration address listed in Step 1, please indicate that address below. Your mailing address may be a P.O. Box. However, it cannot be a foreign address. Please note that your welcome letter and initial confirmation statement will be mailed to your registration address. Subsequent mailings, including monthly statements, will be sent to the address you indicate below.

Street Address or P.O. Box	City	State	Zip Code
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## 6. Indicate How You Heard About Us (please check only one)

Advertisement 500     Mailer 501     Web 502     Financial Advisor 503     I am a GE Interest Plus Investor 504     Friend or Family 505

## 7. Sign and Date the Application

**The Primary Authorized Person acting on behalf of the registered owner must read and sign this section in blue or black ink.**

You hereby request GE Interest Plus for Businesses to establish an investment in GE Interest Plus for Businesses in the name listed as registered owner on this application:

- You authorize General Electric Capital Corporation (GE Capital) and its agents to initiate debits and credits to the bank account designated in Step 4 to implement funds transfers by the methods you have requested. The bank that holds the registered owners' checking or operating account ("Bank") is also hereby authorized to honor these debits and credits. All funds transfers (under the services) will comply with U.S. law. You may terminate this funds transfer authorization by providing written notice to GE Capital, but your notice will be effective only after GE Capital and your Bank have a reasonable opportunity to act on your notice. In addition, you authorize GE Capital and its agents to obtain a credit report from a credit reporting agency and take other steps to verify information about the registered owner and its checking or operating account.
- You certify that you have received the prospectus and a copy of the GE Interest Plus for Businesses privacy policy.
- You understand that to comply with federal regulations, information provided by you on this form will be used to verify your businesses' and the Authorized Person(s)' identity. For example, identity may be verified through the use of a database maintained by a third party and, as part of normal investment verification procedures, a credit bureau inquiry will be conducted. If your businesses' identity cannot be verified, you understand that you may be required to provide additional information, and that your investment may be closed, and redeemed, if verification is still not possible in a timely manner. Such redemptions may have tax consequences.
- You understand that an investment is not equivalent to a deposit or other bank account and is not subject to the protection of the Federal Deposit Insurance Corporation or any other insurance. An investment is not guaranteed under the Federal Deposit Insurance Corporation's Temporary Liquidity Guarantee Program. An investment is not a brokerage account with GE Capital Markets Inc., or any other broker/dealer and is not protected by the Securities Investor Protection Corporation under the Securities Investors Protection Act of 1970. GE Interest Plus for Businesses is not a money market fund and is not subject to requirements of the Investment Company Act of 1940 (including diversification of investments) or the Employee Retirement Income Security Act of 1974, as amended. It is possible to lose money if GE Capital is unable to pay its debts.
- You certify that the registered owner has made an independent determination that GE Interest Plus for Businesses is suitable for its investment needs in light of its financial circumstances and investment objectives.
- You certify that the registered owner is entering into these transactions as the beneficial owner and is not acting as nominee or agent of another legal entity.
- You acknowledge that access to services, including Quick Transactions and Wire Redemption, are provided by way of passwords and log-on IDs, authentication devices or codes (the "Access Devices"). You understand that possession or knowledge of an Access Device by any person may result in that person being able to access the services. You authorize us to provide the services to anyone using the appropriate Access Device(s) without further inquiry. You will be responsible for any use of the services, whether authorized or unauthorized. You agree that maintenance of the security of the services (including the strict confidentiality of the Access Devices) is your responsibility and you will always have in place commercially reasonable procedures to prevent and detect losses caused by unauthorized access to, or unauthorized use of, the services by your employees or third parties.

**Please sign carefully, as signature(s) may be used to verify future changes to your investment. Use blue or black ink only.**

The undersigned General Partner (who is also the Primary Authorized Person listed on the Authorization Form) agrees that any information given on this application is subject to verification and authorizes GE Capital to obtain a credit or other financial responsibility report with respect to himself or herself.

Name of Partnership	Signature of General Partner (Primary Authorized Person)
Printed Full Legal Name and Title of General Partner (Primary Authorized Person)	Date (MM/DD/YYYY)
Social Security Number of General Partner (Primary Authorized Person)	Date of Birth (MM/DD/YYYY)
Office Email Address of General Partner (Primary Authorized Person)	Business Telephone Number with Extension
Home Address of General Partner (Primary Authorized Person) (Street, City, State and Zip Code)	
Previous Address if Less than 5 Years at Home Address (Street, City, State and Zip Code)	

### PLEASE MAKE SURE TO:

- HAVE THE GENERAL PARTNER (PRIMARY AUTHORIZED PERSON) SIGN THE APPLICATION ABOVE
- COMPLETE THE ATTACHED AUTHORIZATION FORM FOR PARTNERSHIPS AND SIGN WHERE INDICATED
- COMPLETE AND SIGN THE ENCLOSED FORM W-9
- IF YOU HAVE DESIGNATED A SECONDARY AUTHORIZED PERSON, HAVE HIM OR HER COMPLETE THE SECONDARY AUTHORIZED PERSON REQUEST FORM
- ATTACH A VOIDED CHECK OR BANK STATEMENT TO VERIFY YOUR BUSINESS CHECKING OR OPERATING ACCOUNT
- REMEMBER TO INCLUDE A COPY OF YOUR CERTIFICATE OF PARTNERSHIP OR PARTNERSHIP AGREEMENT WITH EVIDENCE OF STATE FILING

Mail to: GE Interest Plus for Businesses, P.O. Box 6294, Indianapolis, IN 46206-6294

QUESTIONS? To speak with a Service Representative, call 1-888-674-4138 business days from 8:30 a.m. to 7 p.m. Eastern Time.



TO: General Electric Capital Corporation ("GE Capital") and the current Servicing Agent and Agent Bank, Open Solutions, Inc. and The Huntington National Bank, and any successors.

Certification of Authorization and Authority

The undersigned hereby certifies, warrants and represents, as a General Partner of

\_\_\_\_\_ (the "Partnership")
(Name of Partnership)

- A. That each General Partner has the legal ability to be a partner in the Partnership and to enter into the transactions to be performed pursuant to this certification according to the laws of the state (i) in which such Partnership is located and (ii) in which such partner is domiciled. Attached is a copy of the Certificate of Partnership or Partnership Agreement, which provides the official name of the Partnership.
B. That the individual listed as Primary Authorized Person on the investment below is a General Partner of the Partnership and is hereby authorized and empowered, for and on behalf of the Partnership (herein called the "Partnership"), to complete, execute and deliver the GE Interest Plus for Businesses Application, and that the Primary Authorized Person and the individual listed as Secondary Authorized Person below are, and each of them is, hereby authorized and empowered to act for and on behalf of the Partnership, with GE Capital and its agents, for the purpose of investing and generally dealing in and with GE Capital's Variable Denomination Floating Rate Demand Notes known as GE Interest Plus for Businesses, including the purchase and redemption thereof and the disposition of any related proceeds, and any such past action is ratified and confirmed. In the event of the death or termination of any partner of the said Partnership, or the termination or dissolution of the Partnership, the remaining partners will immediately notify GE Capital of such fact and the undersigned hereby authorizes you, in the event of death or retirement of any of the partners, to take such proceedings, require such papers or restrict transactions in GE Interest Plus for Businesses as you may deem advisable to protect you against any liability, penalty or loss.

Full authority at all times with respect to any related matter deemed to be proper by any Authorized Person in connection therewith is hereby conferred, including authority to give instructions (whether oral, written, electronic or otherwise) to GE Capital and its agents with respect to GE Interest Plus for Businesses; to instruct the transfer of funds, including by wire, by ACH credit or debit, or otherwise, and deposit and/or withdraw funds in related bank accounts; and generally to do and take all action necessary in connection with GE Interest Plus for Businesses, or considered desirable by such Authorized Person with respect thereto. GE Capital and its agents may deal with any and all of the persons directly or indirectly by the foregoing resolution empowered, as though they were dealing with the Partnership directly.

- C. That GE Capital may rely upon any certification given in accordance with these resolutions, as continuing fully effective unless and until GE Capital shall receive due written notice of a change in or the rescinding of the authority so evidenced, and all transactions in GE Interest Plus for Businesses are authorized under the Certificate of Partnership or Partnership Agreement and are in the usual and ordinary course of business of the Partnership.

Authorized Person(s):

Two individuals may be authorized to act on behalf of the Partnership with respect to GE Interest Plus for Businesses.

GENERAL PARTNER AND PRIMARY AUTHORIZED PERSON
Person who signed application (REQUIRED)

Name, Title and Business Telephone Number

SECONDARY AUTHORIZED PERSON\* (Optional)

Name, Title and Business Telephone Number

\*If you are designating a Secondary Authorized Person, that individual must fill out a Secondary Authorized Person Request.

Signature of General Partner

This certification must be signed by a General Partner other than the Primary Authorized Person on the Account, unless you designate that you are the sole General Partner:

I am the sole General Partner of the Partnership.

Signature of General Partner, Date (MM/DD/YYYY), Print Name

NOTE: RETAIN A COPY OF THIS DOCUMENT FOR YOUR RECORDS. ANY MODIFICATION OF THE INFORMATION ABOVE WILL REQUIRE AN AMENDMENT TO THIS FORM. THIS DOCUMENT IS IN FULL FORCE AND EFFECT UNTIL REVOKED OR ANOTHER DULY EXECUTED FORM IS RECEIVED BY GE INTEREST PLUS FOR BUSINESSES, P.O. BOX 6294, INDIANAPOLIS, IN 46206.

Mail to: GE Interest Plus for Businesses, P.O. Box 6294, Indianapolis, IN 46206-6294

QUESTIONS? To speak with a Service Representative, call 1-888-674-4138 business days from 8:30 a.m. to 7 p.m. Eastern Time.

GE Interest Plus for Businesses Investment Number (to be filled in by Servicing Agent)



FORM W-9 — Request for Taxpayer Identification Number and Certification — Give form to the requester. Do not send to the IRS.

Print or type.

Name (as shown on your income tax return)	
Business Name, if Different From Above	
Check Appropriate Box: <input type="checkbox"/> Individual/Sole Proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Liability Company. Enter the Tax Classification (D=disregarded entity, C=corporation, P=partnership) ▶ _____ <input type="checkbox"/> Other ▶	<input type="checkbox"/> Exempt Payee
Address (number, street and apt. or suite no.)	Requester's Name and Address (optional)
City, State and ZIP Code	
List Account Number(s) Here (optional)	

**Part I — Taxpayer Identification Number (TIN)**

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding.

Social Security Number	or	Employer Identification Number
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**Part II — Certification**

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN.

Sign here.

Signature of Primary Authorized Person	Date (MM/DD/YYYY)
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Instructions:

- You may authorize a total of two individuals to act on behalf of the investment owner with respect to GE Interest Plus for Businesses.
- If you are establishing an investment in GE Interest Plus for Businesses for a corporation, partnership or LLC, and have designated a Secondary Authorized Person on your Authorization Form, that individual must fill out and sign this form.
- If you are establishing an investment for a sole proprietorship and want a second person authorized to act on behalf of your investment, please have that individual fill out and sign this form.
- Please be sure to include this form with the paperwork you mail in to establish your investment.
- Please print or type all items except signatures. Sign in blue or black ink where indicated.
- For assistance, please contact a Service Representative at (888) 674-4138 business days from 8:30 a.m. to 7 p.m. ET.

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 or entity who/which opens an account. In certain circumstances, we may obtain and verify this information with respect to any person(s) authorized to effect transactions for your investment. Your investment may be restricted and/or closed if we cannot verify this information.

1. Provide Required Information on Secondary Authorized Person

Printed Full Legal Name and Title of Secondary Authorized Person		Today's Date (MM/DD/YYYY)
Social Security Number of Secondary Authorized Person	Date of Birth (MM/DD/YYYY) of Secondary Authorized Person	
Office Email Address of Secondary Authorized Person	Business Telephone Number with Extension of Secondary Authorized Person	
Home Address of Secondary Authorized Person (Street Address, City, State and Zip Code)		
Previous Address if Less than 5 Years at Home Address (Street Address, City, State and Zip Code)		

2. Sign this Request

Please sign carefully, as signature may be used to verify future changes to your investment. Use blue or black ink only.

The undersigned agrees that any information given on this form is subject to verification and authorizes GE Capital to obtain a credit or other financial responsibility report with respect to himself or herself.

Signature of Secondary Authorized Person	Date (MM/DD/YYYY)
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