

## LOAN AGREEMENT

Effective this date, any payments made benefit by Prairie Trust, Trustee of the Life Navigators Trust III f	
and Account #	, shall be a
loan to me from the Trust, pending receipt of a favorable disability determination from the Wisconsin Disability Bureau (DDB) or Social Security Administration (SSA).  In the event that the DDB or SSA determines that I am not disabled, I agree to repay any loans upon the terms and conditions stated below. If the DDB or SSA determines that I am disabled, then any loans shall be extinguished, and the amounts paid on my behalf for goods or services shall be treated as appropriate distributions from the trust account for my benefit.	
Upon the death of the beneficiary, the obligations of loans and i	nterest shall be extinguished.
Dated this, 20	
Signature of Beneficiary or Legal Representative:	
Print Name and Title, if you are the beneficiary's legal represen	tative:
Approved	Data
Approved:Life Navigators, Inc.	Date:
Approved:	Date:
Prairie Trust, a division of Waukesha State Bank	