

PD F 5263-1  
 Department of the Treasury  
 Bureau of the Public Debt  
 (Revised November 2008)

OMB No. 1535-0084

# ORDER FOR SERIES EE U.S. SAVINGS BONDS TO BE REGISTERED IN NAME OF FIDUCIARY

PLEASE FOLLOW THE INSTRUCTIONS ON THE BACK. PRINT IN CAPITAL LETTERS.

**1. FIDUCIARY REGISTRATION (Due to space restrictions on savings bonds, information printed below may be abbreviated by the Federal Reserve Bank.)**

Name

Social Security Number  -  -  **OR** Taxpayer ID Number  -

**2. NAME OF PERSON TO RECEIVE BONDS IF OTHER THAN FIDUCIARY ABOVE**

Mail to:

**3. ADDRESS WHERE BONDS ARE TO BE MAILED**

(NUMBER AND STREET, RURAL ROUTE, OR POST OFFICE BOX)

(CITY OR TOWN)  (STATE)  (ZIP CODE)

**4. COOWNER OR BENEFICIARY (Optional) The following person is to be named as  coowner  beneficiary:**

Name

(Coownership will be assumed if neither or both blocks are checked.)

**5. BONDS ORDERED**

Denom.	Quantity	Issue Price	Total Issue Price	FOR AGENT USE ONLY
\$ 50	<input type="text"/>	X \$ 25.00 = \$	<input type="text"/>	
\$ 75	<input type="text"/>	X \$ 37.50 = \$	<input type="text"/>	
\$ 100	<input type="text"/>	X \$ 50.00 = \$	<input type="text"/>	
\$ 200	<input type="text"/>	X \$ 100.00 = \$	<input type="text"/>	
\$ 500	<input type="text"/>	X \$ 250.00 = \$	<input type="text"/>	
\$ 1,000	<input type="text"/>	X \$ 500.00 = \$	<input type="text"/>	
\$ 5,000	<input type="text"/>	X \$ 2,500.00 = \$	<input type="text"/>	
\$ 10,000	<input type="text"/>	X \$ 5,000.00 = \$	<input type="text"/>	
TOTAL ISSUE PRICE OF PURCHASE			\$ <input type="text"/>	

**6. DATE PURCHASE ORDER AND PAYMENT PRESENTED TO AGENT**

(MO.)  (DAY)  (YR.)

**7. SIGNATURE**

PURCHASER'S SIGNATURE

( )

PURCHASER'S NAME, IF OTHER THAN OWNER OR FIRST-NAMED COOWNER (Please print) DAYTIME TELEPHONE NUMBER

STREET ADDRESS (If not shown above)  CITY  STATE  ZIP CODE

SEE INSTRUCTIONS FOR PRIVACY ACT AND PAPERWORK REDUCTION ACT NOTICE

## INSTRUCTIONS FOR COMPLETING THE PURCHASE ORDER

- 1. FIDUCIARY REGISTRATION.** Clearly PRINT in block letters the name and title or capacity of the fiduciary (including legal guardians and similar representatives, certain custodians, and trustees) followed by an appropriate reference to the estate or the authority governing the trust. Show the social security account number of the ward or the taxpayer identifying number assigned to the trust. A social security account or taxpayer number must be provided.

Examples Of Authorized Registrations	Abbreviations To Be Used On Purchase Order
<p>Tenth National Bank guardian (or conservator, etc.) of the estate of George N. Brown, a minor (or incompetent, aged person, etc.).</p> <p>Tenth National Bank, trustee under agreement with Paul E. White, dated 2/1/80.</p> <p>Carl A. Black and Henry B. Green, co-trustees under agreement with Paul E. White, dated 2/1/80.</p> <p>Paul E. White, trustee under declaration of trust dated 2/1/80.</p>	<p>Tenth Natl Bk gdn (or cons) est George N Brown an incomp (or aged pers, etc.)</p> <p>Tenth Natl Bk Tr U/A Paul E White dtd 2-1-80</p> <p>Carl A Black &amp; Henry B Green Co-Tr U/A Paul E White dtd 2-1-80</p> <p>Paul E White Tr U/D/T dtd 2-1-80</p>

For complete information as to authorized forms of registration and restrictions, see Department Circular, Public Debt Series No. 3-80.

- 2. NAME OF PERSONS TO RECEIVE BONDS IF OTHER THAN FIDUCIARY ABOVE.** After "Mail to:" print the name to whom the bonds are to be mailed.

- 3. ADDRESS WHERE BONDS ARE TO BE MAILED.** In all cases, print the address where the bonds are to be mailed.

- 4. COOWNER OR BENEFICIARY.** You may **not** include a coowner or beneficiary on bonds issued in a trust form of registration. You **may**, however, include a coowner or beneficiary on bonds that name as owner a minor or incompetent person who is under legal guardianship, but **only** if the funds used to purchase the bonds do not belong to the minor or incompetent.

If you wish to name a coowner or beneficiary, check the appropriate box and print the person's name.

**If you name a coowner:** The bonds may be cashed by the coowner or by the guardian (or conservator, etc.) of the estate of the minor or incompetent.

**If you name a beneficiary:** The bonds may not be cashed by the beneficiary during the lifetime of the owner.

- 5. BONDS ORDERED.** Indicate next to the appropriate denomination the number of bonds being purchased; the total price involved for each denomination (no. of bonds X issue price); and the total amount of purchase. If you fail to indicate the denomination preferred, the fewest number of bonds which equal the total amount of purchase will be issued.

- 6. DATE PURCHASE ORDER AND PAYMENT PRESENTED TO AGENT.** Indicate the date on which the purchase order and payment is presented (received) and accepted by the bank or other financial institution authorized to act as an agent of the Treasury Department.

- 7. SIGNATURE.** Please sign this purchase order. Print your name and address if they don't appear in the registration of the bonds as shown in Sections 1 and 3. In order to promptly resolve any problems connected with this purchase order, also provide a telephone number where you ordinarily may be reached Monday through Friday, from 9 a.m. to 5 p.m.

**NOTE:** Upon completion, submit purchase order and total amount of purchase to a financial institution authorized to sell U.S. Savings Bonds. **ALLOW ABOUT THREE WEEKS FOR PROCESSING.**

**NOTICE UNDER THE PRIVACY AND PAPERWORK REDUCTION ACTS**

The collection of the information you are requested to provide on this form is authorized by 31 U.S.C. Ch. 31 relating to the public debt of the United States. The furnishing of a social security number, if requested, is also required by Section 6109 of the Internal Revenue Code (26 U.S.C. 6109).

The purpose of requesting the information is to enable the Bureau of the Public Debt and its agents to issue securities, process transactions, make payments, identify owners and their accounts, and provide reports to the Internal Revenue Service. Furnishing the information is voluntary; however, without the information Public Debt may be unable to process transactions.

Information concerning securities holdings and transactions is considered confidential under Treasury regulations (31 CFR, Part 323) and the Privacy Act. This information may be disclosed to a law enforcement agency for investigation purposes; courts and counsel for litigation purposes; others entitled to distribution or payment; agents and contractors to administer the public debt; agencies or entities for debt collection or to obtain current addresses for payment; agencies through approved computer matches; Congressional offices in response to an inquiry by the individual to whom the record pertains; as otherwise authorized by law or regulation.

We estimate it will take you about 5 minutes to complete this form. However, you are not required to provide information requested unless a valid OMB control number is displayed on the form. Any comments or suggestions regarding this form should be sent to the Bureau of the Public Debt, Forms Management Officer, Parkersburg, WV 26106-1328. **DO NOT SEND completed form to the above address; instead, send to a financial institution authorized to sell U.S. Savings Bonds.**