



**Principal Bank**  
**Principal Life Insurance Company**  
**Principal National Life Insurance Company**  
**Principal Securities, Inc.**  
*Members of Principal Financial Group®*  
 Des Moines, IA 50392-1520

**Trust Certification  
and Indemnification**

Contract/Account Number: \_\_\_\_\_ Trust Taxpayer Identification Number: \_\_\_\_\_

Name of Proposed Annuitant/Insured: \_\_\_\_\_  
 (for insurance products only)                      First Name                      Middle Initial                      Last Name

The undersigned Trustee(s) hereby confirm(s) the existence of the described Trust below and certifies the following:

1. That the full title of the Trust is \_\_\_\_\_  
 Dated \_\_\_\_\_, and was executed in the State of \_\_\_\_\_
2. That \_\_\_\_\_ is/are the grantor(s)/settler(s).
3. That the Trust is  revocable or  irrevocable. (choose one)
4. That the successor Trustee(s) is/are: \_\_\_\_\_
5. That the Trust is in full force and effect and has not been revoked, terminated, or otherwise amended in any manner which would cause the representations in this Certification of Trust ("Certification") to be incorrect.
6. That the undersigned is/are all of the currently serving Trustee(s). The undersigned Trustee(s) is/are fully empowered to act for said Trust and is/are properly exercising the Trustee's(s') authority under this Trust. No other Trustee(s) or other individual or entity is/are required to execute any document for the Trust.
7. That the Trust explicitly authorizes the authorized Trustee(s) to act:
  - a) Individually without the approval of any other trustees for all transactions; or
  - b) Jointly with the approval of all other trustees for all transactions.
8. That to the undersigned's(s') knowledge, there are no claims, challenges of any kind or causes of action alleged, which contest or question the validity of the Trust or the Trustee's(s') authority to act for the Trust.
9. That the Trustee(s) is/are authorized by the Trust agreement to open and close accounts and in general to exercise any and all rights with respect to Contracts/Accounts of the types specified below: (please check all that apply)
  - Mutual Fund     Life Insurance     Annuities     General Securities     Bank Accounts or Contracts
10. That the undersigned Trustee(s) verifies/verify that all information contained herein is true and complete and agrees/agree (jointly and severally) to indemnify Principal Financial Group, Inc. and its affiliates and hold them harmless from any liability arising from any action or inaction taken in reliance on this Certification. The Trustee(s) agrees/agree to inform, in writing, any change in the composition of the Trust or any other event which could materially alter the certifications made herein. Knowledge of the terms of the Trust may not be inferred solely from the fact that a copy of all or part of the Trust instrument is held by the person(s) relying on this Certification. Any holder of this Certification may rely solely on the statements made herein.

The Principal Financial Group, Inc. reserves the right to request a complete copy of the Trust document at any time, including any amendments, addendums, or related exhibits.

The undersigned being all of the Trustee(s) does/do hereby execute this Certification of Trust and Indemnification.

Print Trustee Name	Print Trustee Name	Print Trustee Name
Signature of Trustee	Signature of Trustee	Signature of Trustee
Trustee Address	Trustee Address	Trustee Address
Phone Number	Phone Number	Phone Number
Date	Date	Date

**Attach extra signature page if necessary**