1ST FRANKLIN FINANCIAL CORPORATION 213 E. Tugalo St., P.O. Box 880, Toccoa, GA 30577 706-886-7571 or 1-800-282-0709 (GA toll-free)

INVESTMENT PURCHASE ORDER

One Investor must be age 18 or older

Primary Investor:	Tax ID#:	ID Type/#:	B'date:
Investor:	Tax ID#:	ID Type/#:	B'date:
Investor:	Tax ID#:	ID Type/#:	B'date:
Investor:	Tax ID#:	ID Type/#:	B'date:
Street Address:		Mailing Address:	
City, State, Zip:		City, State, Zip:	
Home Phone:		Work Phone:	
Investment Information:			
Amt: \$	Amt: \$	Amt: \$	Amt: \$
Term:	Term	Term:	
Paid Quarterly: Paid Semi-annually: Paid Annually: **All information has been v	by check orerified on the Purchase Order	by transfer to Senior Demand by transfer to Senior Demand by transfer to Senior Demand and is as I requested:	d Note #d Note #d Note #(please initial)
ARE NOT INSURED BY THE FDIC. Signature: Date:			
To be completed by 1st F	ranklin Financial:	Home Office:	
Employee:	-	Note #:	##
Office:		New Investor:	Existing Investor:
Cash Received:	_ Check Received:	Executive Officer:	
Transfer \$	From #:	Signature Cards:	Prospectus Given:
Transfer \$	From #:	Obtained	Debenture
Transfer \$ Transfer \$	From #: From #:	On file To follow	Senior Demand Note Previously Given
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