

Name of Corporation, Partnership, LLC or Association

Taxpayer Identification Number

APPLICATION

not FDIC insured. These notes are not rated by any rating agency and we do not

anticipate that they will be rated in the future.

GENERAL INFORMATION (select one)			Do you operate under an Assumed Name or DBA (Doing Business As)?			
☐ Cat Employee	Cat Retiree	Cat Shareholder	If yes, what name?			
Cat Customer	Cat Dealer employee/retiree	Cat Dealer	Type of Business			
Cat Supplier	Other		In which state was your business registered	i?		
Will you receive funds f	rom outside the U.S.? Yes N	n	Established date	Number of emp	oyees	
*	otal amount you intend to invest?* \$_	o .	Annual Sales Revenue			
	ect to a maximum limit. For further details, ple	ase reference the program prospectus.				
Primary Owner (Individual, Joint & Custodial Inve	estments)	3 MAILING ADDRESS	3		
Name (Last, First, M.I.)	1		Registered Address			
Social Security Number		Date of Birth	Street Address (P.O. Box will not be accepted	ed)	Apt.	
Oriver's License Numbe	r	State	City	State	Zip	
Occupation/Position		Annual Income	Home Phone with Area Code	Work Phone v	vith Area Code	
TVDE OE II	NVESTMENT OW	NEDCUID				
☐ Individual Ow		nt Ownership	Joint Owner's Address (Only if di	fferent from above)		
			Street Address (P.O. Box will not be accepted	ed)	Apt.	
lame (Last, First, M.I.)			City	State	Zip	
Social Security Number		Date of Birth	Home Phone with Area Code	Work Phone v	vith Area Code	
Driver's License Number	r	State				
Occupation/Position		Annual Income	Trustee Address			
☐ Gifts to Minor	'S		Street Address Trustee #1 (<i>P.O. Box will not</i>	be accepted)	Apt.	
Name of Minor (Last,	First, M.I.)		City	State	Zip	
Minor's Social Security	Number	Date of Birth	Home Phone with Area Code	Work Phone и	vith Area Code	
Minor's State of Reside	nce					
☐ Trust	ure i i i i i i i o	: 10 : : N D (B:d	Street Address Trustee #2 (P.O. Box will not	be accepted)	Apt.	
and Driver's Licens	dditional page and provide the Name, Soc e Number of each additional trustee.		City	State	Zip	
Please include a co	ppy of the first 3 and last 3 pages of the Tr	ust.	Home Phone with Area Code	Work Phone и	vith Area Code	
Title and Date of Trust						
Taxpayer Identification	Number					
Name of Trustee #1 (L	ast, First, M.I.)					
Social Security Number Date of Birth			government has passed the USA PATE	To help fight the funding of terrorism and money laundering activities, the U. government has passed the USA PATRIOT Act, which requires banks, including our processing agent bank, to obtain, verify, record and, in certain circumstances, report information that identifies persons who engage in		
Driver's License Number State						
Name of Trustee #2 (L	.ast, First, M.I.)		certain transactions with or through a sell you a Cat Financial PowerInvestm	bank. This means that	t, in order for us	
Social Security Number Date of Birth			residential or street address (no P.O. boxes), date of birth and Social Security Number or other Tax ID of ALL PERSONS listed on the note.			
Driver's License Numbe	r	State				
☐ Corporate, Pa	rtnership, LLC or Associatio	on	The Cat Financial PowerInvestment is			
Please provide evidence of the individuals authorized to sign on behalf of the corporation, partnership, LLC or association.			typically a diversified fund consisting of short-term debt securities of many issuers. This investment is not subject to the diversification and investmen quality standards of the Investment Company Act of 1940. An investment i			
			PowerInvestment notes is not equivalent	ent to a deposit or bar	k account and	

INITIAL INVESTMENT The minimum initial investment is \$250. However, if you first invest through a Caterpillar Peoria payroll or pension deduction, then the initial investment is \$50 each month until the minimum required investment of \$250 is attained. Thereafter the \$250 minimum must be maintained. This \$50 minimum initial investment is Cat Financial PowerInvestmentSM only available to those investing through a Caterpillar Peoria payroll or pension P.O. Box 75956 Chicago, IL 60675-5956 deduction Check \$ Amount (minimum of \$250) Please enclose your personal check made payable to Cat Financial PowerInvestmentSM. Check Writing (Automatic) Corporate checks are acceptable for corporate investments only. Investments made by check are available for redemption seven (7) business days after posting. No cashier's (minimum per check is \$250). checks, third-party checks, starter checks, traveler's checks, credit-card checks or money orders will be accepted for an initial investment. Payroll Deduction (Caterpillar Peoria-paid Employees Only)

\$ Amount to be deducted per check Please indicate your payroll category below: ☐ **Hourly** paid weekly –\$12.50 minimum per paycheck to join ☐ Salaried paid twice monthly -\$25 minimum per paycheck to join ☐ Management paid monthly –\$50 minimum per paycheck to join

\$ Amount to be deducted per check (\$50 minimum per Pension check)

SUBSEQUENT INVESTMENT OPTIONS

■ Automatic Investment from Checking Account

\$ Amount (minimum of \$50)

☐ Pension Deduction

Attach a voided check, which will provide your correct bank information for processing, or provide the information below. Automatic withdrawals occur on or about the 18th of each month.

Name of Checking Account Holder(s)						
Checking Account Number	Savings Acc	Savings Account Number				
Financial Institution Routing Number						
City	State	Zip				

REDEMPTION OPTIONS

Written Redemption (Automatic)

You may redeem all or part of your money by writing:

Redemption must be in the amount of \$250 or more, or the balance of your notes, whichever is less. This written redemption option is the only way you may redeem your entire investment in Cat Financial PowerInvestment notes.

A supply of free checks will be sent to your mailing address in 10 business days

☐ Telephone Redemption (Check if desired)

This option allows you to call and request a check be sent to the registered account address (minimum telephone redemption if sent by check is \$250 and if sent by wire is \$1,000).

☐ Automatic Redemption (Check if desired)

This option allows you to have a check for redeemed PowerInvestment notes sent to you in a specified amount on a periodic basis (automatic draft on or about the 16th of the month only). This option is only available if your investment balance will be \$10,000 or more after such redemption.

Redemption proceeds will be mailed to the owner at the registered address.

\$ Amount per month (minimum of \$250)

■ Wire Transfer (Check if desired)

Signature of Joint Owner

By calling Cat Financial PowerInvestment, you can request funds be sent to a specified bank account (minimum \$1,000). A fee will apply. Enter your bank account information below:

Name of Bank				
Name on Bank Account	☐ Checking	☐ Savings		
Address of Bank				
City	State	Zip		
ABA Number	Account Nu	Account Number		

7 AUTHORIZATION

I (we) represent that I am (we are) of legal age, have the authority to invest in and redeem Cat Financial PowerInvestment notes pursuant to information contained on this form, and have received and read the current Prospectus pursuant to which the Cat Financial PowerInvestment notes are offered. I (we) acknowledge that the Cat Financial PowerInvestment notes are not a bank account, are not protected by the FDIC or other insurance, are an investment in the unsecured indebtedness of Caterpillar Financial Services Corporation and are backed only by the assets of Cat Financial, and are not guaranteed by Caterpillar, Inc. or any other company. I (we) further acknowledge that these notes are not rated by any rating agency and are not anticipated to be rated in the future. I (we) further represent that the notes purchased pursuant to this application and any further purchases of notes are suitable investments in light of my (our) financial resources and investment objectives. By signing this form, I (we) certify under penalties of perjury that 1) I am (we are) not subject to backup withholding under provisions of Section 306 (a)(1)(c) of the Internal Revenue Code.

I am (we are) not subject to backup withholding because I (we) have not been notified by the IRS that I am (we are) subject to IRS backup withholding (unless the box [] Live have been notified of and Lemina and subject to IBS health withhelding

_	i (we) nave been notified of t	med of and fam (we are) subject to into backup withholding.		
Sig	nature	Date		

Date

Mail completed application to: Cat Financial PowerInvestmentSM | P.O. Box 75956 | Chicago, IL 60675-5956

