

STATE OF TEXAS

§
§
§

_____ COUNTY

HCF INVESTOR AFFIDAVIT

BEFORE ME appeared _____, who is personally known to me, and upon his or her oath was deposed and said:

1. My name is_____. I am over the age of eighteen, am of sound mind, and have personal knowledge of the facts stated herein, which are all true and correct.

2. I invested _____ with Hill Country Funding, LLC (“HCF”) on or about _____, 20____.

3. I became aware of HCF when

4. The investment was described to me as follows by the following persons:

5. The reliability of the bond was described to me as follows by the following persons:

6. I was provided with the following materials:

7. The materials I was provided with described the investment as follows:

8. The risk of the investment was described to me as follows by the following persons:

9. I was told that HCF had done the following due diligence on the investment:

10. I was told that the life expectancy from Midwest Medical Review was _____% accurate.

11. The following check marks indicate some of the representations that were made to me by HCF representatives, that were important to me, and on which I relied before making my investment:

- a. _____ I was told that my funds would be maintained in an escrow account.
- b. _____ I was told that this was a safe investment.
- c. _____ I was not told that the life expectancy from Midwest Medical Review was a median.
- d. _____ I was told that HCF had diligently investigated the reliability of the bonding companies.

12. Additionally, the following representations were important to me and I relied on them when making my decision to invest in HCF:

13. The following persons made the specified representations identified in Numbers 9-12 above to me:

14. If I had known the following, I would not have invested in HCF:

15. My position on consolidation of the RV and HCF estates is as follows:

- a. _____ I do not object to the consolidation of the RV and HCF estates.
- b. _____ I do object to the consolidation of the RV and HCF estates.

16. My position on the amendment of the investors' irrevocable-beneficiary status on the Sun Life policies is as follows:

- a. _____ I have not invested in the Sun Life policy.
- b. _____ I invested in a Sun Life policy and I would agree to and amend my current irrevocable-beneficiary status.
- c. _____ I invested in a Sun Life policy and will not agree to and amend my current irrevocable-beneficiary status.

17.

I declare under penalty of perjury that the foregoing is true and correct.

Printed Name of Affiant

Signature of Affiant

SUBSCRIBED AND SWORN TO before me on this the ____th day of _____, 2011.

Notary Public