

NOTICE OF RECISSION, SURRENDER AND TERMINATION OF FIDUCIARY
RESPONSIBILITY

Reference: Account Number:4185 8752 9876 3974

To:Ben McCreery Vice President
Providian National Bank
PO Box 99604
Arlington, TX76096-9604

Please take notice that the undersigned rescinds any signatures associated with the above referenced account.

Be it further noticed that the undersigned surrenders the agreement, credit card and account between Providian National Bank and the fiction IRIS FORSMAN back to their rightful owners.

Surrender: To give back; yield; render up; restore; Black's Law Dictionary, pg. 1444.

These items, the credit card, the account, and the agreement are the creation of Providian National Bank as the creator, they belong to Providian National Bank... Providian National Bank should have them back.

Be it further noticed that Iris Forsman no longer accepts any fiduciary responsibility for the fiction IRIS FORSMAN in the instant accounts. Please see the attached Form 56.

Any further contact by Providian National Bank or any of its agents with Iris Forsman will be considered harassment and attempted extortion through violence. These threats will be dealt with in an appropriate manner.

Affidavit

State of Arizona)

)ss:

County of LaPaz)

I, Iris Forsman, hereafter I, am competent to testify by first hand knowledge do hereby affirm that:

I live at 6251 Kimber Rd., #24, Cashmere, Washington,

I, Iris Forsman, am a woman.

I have never represented myself using an all caps name.

I surrender back to their creators and rightful owner, Providian National Bank and Visa Card its account or agreement.

The attached copy of Form 56 is true and accurate.

Further affiant saith naught,.

I, Iris Forsman, knowing the penalty of bearing false witness, hereby affirm the foregoing to be true and correct to the best of my knowledge and belief and do affix my signature in testimony of the foregoing notice.

EXECUTED THIS 27 day of February, 2006

Iris Forsman
Iris Forsman

6251 Kimber Road, # 24, Cashmere, Washington, 98815

Signatory, Iris Forsman, personally appeared before me and is known to me and did affix her signature to this document. In witness thereof I set my hand and seal

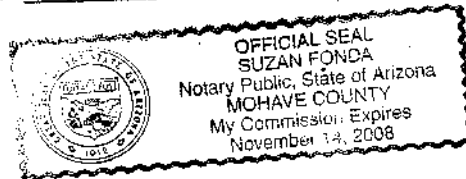
Suzan J. Fonca
Notary Public in and for the state of Arizona

My commission expires: Nov. 14, 2008

This document has been recorded at Peoples Recorder.com for the world to see.

Record #: charles forsman2 Date: 3/27/06

This document prepared by:
Charles Forsman
6251 Kimber Rd
Cashmere, Washington 98815



Notice Concerning Fiduciary Relationship

OMB No. 1545-0013

(Internal Revenue Code sections 6036 and 6903)

Part I Identification

Name of person for whom you are acting (as shown on the tax return)		Identifying number	Decedent's social security no.
IRIS FORSMAN		532 20 2905	
Address of person for whom you are acting (number, street, and room or suite no.)			
P.O. Box 10121			
City or town, state, and ZIP code (if a foreign address, see instructions.)			
EUGENE, OR 97440			
Fiduciary's name			
Iris Forsman			
Address of fiduciary (number, street, and room or suite no.)			
6251 Kimber Rd #24			
City or town, state, and ZIP code			Telephone number (optional)
Cashmere, WA 98815			()

Part II Authority

- 1 Authority for fiduciary relationship. Check applicable box:
- a(1) Will and codicils or court order appointing fiduciary
- b(1) Court order appointing fiduciary
- c Valid trust instrument and amendments
- d Other. Describe ▶
- (2) Date of death
- (2) Date (see instructions)

Part III Nature of Liability and Tax Notices

- 2 Type of tax (estate, gift, generation-skipping transfer, income, excise, etc.) ▶
- 3 Federal tax form number (706, 1040, 1041, 1120, etc.) ▶
- 4 Year(s) or period(s) (if estate tax, date of death) ▶
- 5 If the fiduciary listed in Part I is the person to whom notices and other written communications should be sent for all items described on lines 2, 3, and 4, check here
- 6 If the fiduciary listed in Part I is the person to whom notices and other written communications should be sent for some (but not all) of the items described on lines 2, 3, and 4, check here and list the applicable Federal tax form number and the year(s) or period(s) applicable

Part IV Revocation or Termination of Notice

Section A—Total Revocation or Termination

- 7 Check this box if you are revoking or terminating all prior notices concerning fiduciary relationships on file with the Internal Revenue Service for the same tax matters and years or periods covered by this notice concerning fiduciary relationship
- Reason for termination of fiduciary relationship. Check applicable box:
- a Court order revoking fiduciary authority
- b Certificate of dissolution or termination of a business entity
- c Other. Describe ▶ WASHINGTON MUTUAL BANK, FORMERLY PROVIDIAN NATIONAL BANK

Section B—Partial Revocation

- 8a Check this box if you are revoking earlier notices concerning fiduciary relationships on file with the Internal Revenue Service for the same tax matters and years or periods covered by this notice concerning fiduciary relationship
- b Specify to whom granted, date, and address, including ZIP code.
- ▶

Section C—Substitute Fiduciary

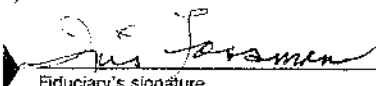
- 9 Check this box if a new fiduciary or fiduciaries have been or will be substituted for the revoking or terminating fiduciary and specify the name(s) and address(es), including ZIP code(s), of the new fiduciary(ies)
- ▶

Part V Court and Administrative Proceedings

Name of court (if other than a court proceeding, identify the type of proceeding and name of agency)		Date proceeding initiated		
Address of court		Docket number of proceeding		
City or town, state, and ZIP code	Date	Time	a.m. p.m.	Place of other proceedings

Part VI Signature

I certify that I have the authority to execute this notice concerning fiduciary relationship on behalf of the taxpayer.

Please Sign Here			
	Fiduciary's signature	Title, if applicable	Date