

FINANCIAL ACCOUNT TRANSFER TO TRUST

To:

THIS Assignment, is being made on this the _____ day of _____, 20____, by _____, _____ County, State of Florida, as the Assignor(s), whether one or more, and _____, as Trustee of THE _____ REVOCABLE TRUST dated _____, as the Assignee.

Assignor(s) do hereby assign, convey, and deliver to the Assignee all of the Assignor's right, title, and interest in and to the following described property:

- ☐ Checking Account No(s): _____ at _____ .
- ☐ Checking Account No(s): _____ at _____ .
- ☐ Savings Account No(s): _____ at _____ .
- ☐ Savings Account No(s): _____ at _____ .
- ☐ _____ Account No(s): _____ at _____ .
- ☐ _____ Account No(s): _____ at _____ .
- ☐ _____ Account No(s): _____ at _____ .
- ☐ Brokerage Account No(s): _____ at _____ .

This assignment includes, but is not limited to, all cash and securities held in said Accounts.

These account shall hereafter be titled in the name of _____, as Trustee of THE _____ REVOCABLE LIVING TRUST, with an address of _____.

TO HAVE AND TO HOLD unto the Trustee and his or her successors and assigns forever.

DATED this the _____ day of _____, 20____.

Trustor Signature

Print Name: _____

Trustor Signature

Print Name: _____

STATE OF FLORIDA

COUNTY OF _____

The foregoing instrument was acknowledged before me this _____ (date),
by _____ (name), who is personally known to me
or who has produced _____ (type of identification) as identification.

Notary Public

Printed Name: _____

My Commission Expires:

Commission # _____