

AMENDMENT TO TRUST

THIS Amendment, is being made on this the _____ day of _____,
20____, by _____ of _____ County, State of
_____, as the Trustor of THE _____ REVOCABLE TRUST dated
_____.

Trustor(s) do hereby amend the trust mentioned above as follows:

- 1.
- 2.
- 3.
- 4.

Except as amended, all other terms and provisions of the trust are to remain in full force and effect.

DATED this the _____ day of _____, 20_____.

Trustor Signature
Print Name _____

Trustor Signature
Print Name _____

STATE OF MARYLAND

COUNTY OF _____

Personally appeared before me, a Notary Public, in and for said county and state, on this _____ day of _____, 20____, the within named _____, known to me, or satisfactorily proven, to be the person whose name is subscribed to the within instrument and who acknowledges that he/she/they (strike one) executed the same for the purposes therein contained.

NOTARY PUBLIC

Print Name: _____

My Commission Expires:
