## **AMENDMENT TO TRUST**

	THIS Amendr	nent, is being	made on	this the		day of		,	
20	, by	_			of	(	County, S	tate of	
	, a	s 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 NORTH DAKOTA

COUNTY OF \_\_\_\_\_

On this \_\_\_\_\_\_ day of \_\_\_\_\_\_, in the year \_\_\_\_\_, before me personally appeared \_\_\_\_\_\_, known to me (or proved to me on the oath of \_\_\_\_\_\_) to be the person who is described in and who executed the within and foregoing instrument, and acknowledged to me that \_\_\_\_\_\_ (he/she/they) executed the same.

(Seal)

Notary Public

Printed Name: \_\_\_\_\_

Commission Expires: