FINANCIAL ACCOUNT TRANSFER TO TRUST

To:

THIS Assignment, is being made on this	s the day of,
20, by,	County, State of New
York, as the Assignor(s), whether one or more, and	d, as Trustee of
THE REVOCABLE	TRUST dated, as the
Assignee.	
Assignor(s) do hereby assign, convey, and oright, title, and interest in and to the following descr Checking Account No(s): at Checking Account No(s): at Savings Account No(s): at	bed property:
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.	3
DATED this the day of	, 20
	Trustor Signature Print Name: Trustor Signature
	Print Name:
	FIIIL NAIIIE.

STATE OF NEW YORK COUNTY OF _____ On the day _____ in the year before me, the undersigned, personally , personally known to me or proved to me on the appeared basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity (ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument. Notary Public Printed Name: _____ My Commission Expires: