

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 _____

COUNTY OF _____

In _____ in said County on the _____ day of _____,
_____, before me personally appeared _____
(name/title) of _____, to me known and
known by me to be the party executing the foregoing instrument on behalf of said corporation
and he/she acknowledged said instrument by him/her executed to be his/her free act and deed,
individually and in his/her said capacity and the free act and deed of said corporation.

Notary Public

Printed Name: _____

My Commission Expires:
