## **AMENDMENT TO TRUST**

	THIS	Amendment, is be	ing made on tl	his the	day of	,
20	, by _			of		County, State of
		Amendment, is be	stor of THE $\_$		_ REVOCABLE	TRUST dated
	Trusto	r(s) do hereby ame	nd the trust men	tioned above as	s follows:	
	1.					
	2.					
	3.					
	4.					
and ef		t as amended, all o	ther terms and p	rovisions of the	trust are to ren	nain in full force
	DATE	D this the	day of		, 20	
				Trustor Signa Print Name _	ature	
				Trustor Signa	ature	

## STATE OF VERMONT

COUNTY OF		
On this day of _ before me personally appeared of person acknowledging) to me kn instrument, and to me that he/she/ and deed.	own to be the person who execut he/she/they the	ted the foregoing ereupon duly acknowledged
	Notary Public  Print Name:	
My commission expires:		