

You must wait until you're in the presence of a certifying officer to sign this form.		
Sign Here ⇒ _____ <div>(Signature of Grantor)</div>	_____ <div>(Print Name)</div>	
Home Address	_____ (Number and Street or Rural Route) (City) (State) (ZIP Code) _____ (Legacy Treasury Direct® Account No., if applicable) (Social Security Number)	
E-Mail Address _____ <div>(Optional)</div>	_____ <div>(Daytime Telephone Number)</div>	
The grantor must sign in your presence. You must complete the certification and affix your stamp or seal.		
I CERTIFY that _____ , whose identity is known or was proven to me, personally appeared before me this _____ day of _____ , at _____ , and signed this form. <div>(Month) (Year)</div> <div>(City) (State)</div>		
	_____ <div>(Signature and Title of Certifying Officer)</div>	
	_____ <div>(Number and Street or Rural Route)</div>	
	_____ <div>(City) (State) (ZIP Code)</div>	
	_____ <div>(Name of Financial Institution)</div>	