



TRUST CERTIFICATION

The undersigned Trustee(s) declares the following:

Trust: The Trust known as _____ (the complete legal name of the Trust), originally executed on _____ (date) and (if applicable) was amended on _____ (dates of applicable amendments), is a valid and existing trust.

1. **Settlor(s).** The full name(s) of the settlor(s) of the Trust is/are:

2. **Trustee(s).** The full name(s) of the trustee/co-trustees is/are:

3. **Successor Trustee(s).** As of today, the person(s) designated to become successor trustee or successor co-trustees is/are:

4. **Revocability** (*check only one*).

- a. **Revocable.** The Trust is a revocable trust.
- b. **Irrevocable.** The Trust is an irrevocable trust.

5. **Notification.** I/We agree to immediately notify the Bank if:

- a. the Trust is revoked or terminated;
- b. the Trust is amended, in which case we agree to also provide the Bank with correct copies of the amendment(s);
- c. one or more trustees and/or successor trustees change, in which case we understand that all trustees will be required to sign an updated Trust Certification; or
- d. if the Trust is currently revocable, to immediately notify the Bank if the Trust becomes irrevocable.

The undersigned is/are all of the current trustee(s) of the Trust and as such have all requisite authority to bind the Trust. The undersigned hereby warrants that any co-trustee, acting alone and without the consent of the other co-trustee, is authorized to act on behalf of and bind the Trust in all matters associated to the account held at Vio Bank (a division of MidFirst Bank).

The undersigned declares that the Trust has not been revoked, modified, or amended in any manner which would cause representations contained in this Trust Certification to be incorrect.

(signature page follows)



Trust Name: _____

SIGNATURES OF ALL TRUSTEES ARE REQUIRED AND MUST BE NOTARIZED

SIGNATURE: _____ DATE: _____

SIGNATURE: _____ DATE: _____

SIGNATURE: _____ DATE: _____

STATE OF _____)
COUNTY OF _____)

This instrument was acknowledged before me on this _____ day of _____, 20____
by _____, _____,
as Trustee(s) of the _____ Trust.

My commission expires : _____ X
Notary Public

(Seal)
STATE OF _____)
COUNTY OF _____)

This instrument was acknowledged before me on this _____ day of _____, 20____
by _____, _____,
as Trustee(s) of the _____ Trust.

My commission expires : _____ X
Notary Public

(Seal)
STATE OF _____)
COUNTY OF _____)

This instrument was acknowledged before me on this _____ day of _____, 20____
by _____, _____,
as Trustee(s) of the _____ Trust.

My commission expires : _____ X
Notary Public

(Seal)