



ASSIGNMENT OF BENEFICIAL INTEREST

Chicago, Illinois
Dated: _____

FOR VALUE RECEIVED I / We hereby sell, assign, transfer and set over unto _____

All my/ our rights, powers, privileges and beneficial interest in and to that certain trust agreement dated the _____ Day of _____, A.D., 20 _____, and known as ALBANK NA Trust Number _____, including said interest of the undersigned in the property held subject to said trust agreement. This assignment transfers _____ percent (_____ %) of the entire beneficial interest in said trust.

The power of direction under this Trust hereafter shall be exercised by: _____

Assignor(s)

By: _____ Please sign
Print Name: _____

By: _____ Please sign
Print Name: _____

By: _____ Please sign
Print Name: _____

By: _____ Please sign
Print Name: _____

ACCEPTANCE

I / We accept the foregoing assignment subject to all of the provisions of said trust agreement.

By: _____ Please sign
Print Name: _____

Address: _____

Social Security # _____

Phone # _____

By: _____ Please sign
Print Name: _____

Address: _____

Social Security # _____

Phone # _____

By: _____ Please sign
Print Name: _____

Address: _____

Social Security # _____

Phone # _____

By: _____ Please sign
Print Name: _____

Address: _____

Social Security # _____

Phone # _____

By: _____ Please sign
Print Name: _____

Address: _____

Social Security # _____

Phone # _____

May the name of any beneficiary be disclosed to the public? _____ (Y/N)

To whom shall inquiries be referred? _____ Address: _____

To whom shall bills be mailed? _____ Address: _____

Email: _____

(Note: This assignment should be executed in duplicate by both assignor and assignee and one executed copy lodged with ALBANK NA. This assignment shall not be binding on the Trustee unless and until the original or duplicate thereof is lodged with the Trustee and its agreement indicated thereon.)

ASSIGNMENT OF BENEFICIAL INTEREST

ALBANK NA, as Trustee under its Trust Number _____, hereby acknowledges receipt of the foregoing assignment this _____ day of _____ A.D. 20_____.

ALBANK NA, as trustee, as foresaid.

By: _____

Trust Officer.

State of _____) SS

County of _____)

I, the undersigned, a Notary Public in and for the County and State aforesaid, do hereby certify that

is/are personally known to me to be the same person(s) whose name is subscribed to this instrument appeared before me this day in person and acknowledged that he/she/they signed and delivered the said instrument as his/her/their own free and voluntary act.

Given under my hand and Notarial Seal this _____ day of _____, 20_____.

Notary Public