PARKWAY BANK & TRUST COMPANY AFFIDAVIT OF SUCCESSOR BENEFICIARY

PARKWAY BANK & TRU	ST COMPANY, TRUST NO:
SECTION 1:	
	nced Trust, the undersigned is a successor beneficiary to the beneficial interest
under said 11 ast which was ope	(deceased party)
prior to his (her) death on:	
	(date)
SECTION 2:	
The undersigned does hereby, beneficiary hereunder, and fur any matter concerning the Tru	certify, confirm, and approve the terms of said Trust Agreement, as successor ther authorizes Parkway Bank & Trust Company, as Trustee to hereafter act in ust, the Trust property, or proceeds of any nature, insofar as the interest of the the written direction of the following party (or parties):
SECTION 3:	fy, confirm, and approve that Parkway Bank & Trust Company shall receive an
or transactions will be billed	ng as any property remains in the Trust and that any request for documentation in accordance with the most current fee schedule. Effective immediately the d receive all billing and correspondence of any nature and agrees to notify all (name)
	(nume)
	(address)
Printed Name:	Social Security Number:
Address and Phone:	
	Signature
The undersigned Notary Public cer or is personally known to me. They of	rtifies the party(ies) signing above appeared in person before me with proper identification y acknowledged signing this document as their own free and voluntary act on thisday
	Notary Public
	IMPORTANT:

A <u>CURRENT</u> PHOTO ID FOR THE PARTY SIGNING ABOVE MUST BE SUBMITTED WITH THIS FORM. DRIVER'S LICENSE, STATE OR GOV'T ID, AND PASSPORT ARE ACCEPTABLE FORMS OF ID. PLEASE MAKE SURE THE ID #, EXPIRATION DATE, PHOTO, DATE OF BIRTH AND SIGNATURE ARE LEGIBLE. (if the expiration of the driver's license has been extended by sticker on the backside, please copy both sides)

THE OMISSION OF THE PHOTO ID MAY DELAY THE PROCESSING OF THIS INFORMATION.

PLEASE CONTACT PARKWAY BANK & TRUST COMPANY, TRUST DEPARTMENT WITH ANY QUESTIONS. 708-867-6600

