

# MARQUETTE BANK

## ACCEPTANCE OF BENEFICIAL INTEREST

Date: \_\_\_\_\_

Decedent: \_\_\_\_\_ Date of Death: \_\_\_\_\_

Marquette Bank Land Trust No.: \_\_\_\_\_ Dated: \_\_\_\_\_

provided that upon the death of \_\_\_\_\_  
the beneficial interest that has not been heretofore transferred, assigned, amended or changed, was to vest  
in the following manner:

\_\_\_\_\_  
The undersigned parties do hereby accept said beneficial interest subject to all of the provisions of said  
trust agreement.

### PLEASE COMPLETE ALL REQUESTED INFORMATION

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Area Code & Phone Number

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Area Code & Phone Number

\_\_\_\_\_  
Social Security Number

State of \_\_\_\_\_ )  
County of \_\_\_\_\_ ) SS

I, the undersigned, a Notary Public, in and for said County and State aforesaid, do hereby certify that  
\_\_\_\_\_ is/are personally known  
to me to be the same person(s) whose name(s) is/are subscribed to this instrument appeared before me this day in  
person and acknowledged that he/she/they signed and delivered the said instrument of his/her/their own free and  
voluntary act.

Given under my hand and Notarial Seal this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
Notary Public

**Marquette Bank**, as trustee aforesaid, does hereby acknowledge receipt of the foregoing Acceptance of Beneficial Interest.

Date \_\_\_\_\_

**MARQUETTE BANK**

By: \_\_\_\_\_, Trust Officer