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	Signature
_____	_____
Printed Name Date of Birth	Printed Name Date of Birth
_____	_____
Street Address	Street Address
_____	_____
City, State, Zip	City, State, Zip
_____	_____
Area Code & Phone Number	Area Code & Phone Number
_____	_____
Social Security 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