

200 N. Martingale Rd., Ste. 405 Schaumburg, IL 60173 847-342-4500 info@1891FinancialLife.com www.1891FinancialLife.com

TRUST STATEMENT

This is a statement that the		
This is a statement that the	NAME OF TRUST AGREEMENT	
Trust Agreement datedDATE O		
DATE OF DEATH OF THE INSURED		
The tax identification number for this trust i	is	·
	TRUSTEE SIGNATURE	
Please Note: If this trust agreement was n proceeds of this certificate will be paid acc		date of death, the
Subscribed and sworn to before me on thisday of	, 20	
NOTARY PUBLIC		
My commission expires		

Please submit a copy of the complete Trust which shows the name of the Trust, the Trustees and successor Trustee, if you are a successor trustee, and the signature page showing the deceased member's signature and date the Trust agreement was signed.

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