STATE OF SOUTH CARO	LINA )	)	
COUNTY OF: HORRY	)	) IN THE PROBATE COURT )	
IN THE MATTER OF:	) ) ) ) CA	TRUSTEE INFORMATION ) ) CASE NUMBER	
On	, 20, I accepted app	ointment as trustee for the above trust estate.	
	Executed this day of	, 20	
	Signature:		
	Name:		
	Address:		
	Telephone (O):		
	(H):		
	Attorney:		
	Address:		
	Telenhone:		
	i diopriorie.	-	

\*Must be within past 30 days