



**AUTHORIZED SIGNERS LIST**  
**For**

\_\_\_\_\_  
*(Name of Trust account)*

\_\_\_\_\_  
*(Account Number)*

**This Authorized Signers List contains the specimen signature(s) of persons authorized to give instructions, including but not limited to, financial transactions, distributions, and trading instructions, with respect to such account(s). Each communication of directive shall be valid when received by T Bank, N.A. and is signed by any \_\_\_\_\_ of the following:**

**Name**

**Signature**

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

\_\_\_\_\_  
*Customer Name*

\_\_\_\_\_  
*Signature of Account Owner*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Customer Name*

\_\_\_\_\_  
*Signature of Joint Account Owner (if applicable)*

\_\_\_\_\_  
*Date*