

# OFFICER'S STATEMENT OF TRUST ASSETS AND LIABILITIES

CHARTER NO.: \_\_\_\_\_

List all assets and liabilities (accountability) carried on the trust books as of the close of business date disclosed below.

ASSETS		LIABILITIES	
	Amount		
Noninterest Bearing Deposits		Personal Accounts	Amount
Own Bank and Affiliated Institutions	_____	Personal Trusts	Managed Accounts
Other Institutions	_____	Agency Accounts	Accounts
Interest Bearing Deposits		Retirement Related Accounts	(Number)
Own Bank and Affiliated Institutions	_____	Defined Contribution	
Other Institutions	_____	Defined Benefit	
U. S. Government and Agency Obligations	_____	Other Retirement Accounts	
State, County, and Municipal Obligations	_____	Corporate Trusts and Agencies	
Money Market Mutual Funds	_____	Investment Management	
Other Short-Term Obligations	_____	Agency Accounts	
Other Notes and Bonds	_____	Other Fiduciary Accounts	
Common and Preferred Stocks	_____	Custody and Safekeeping Accounts	
Real Estate Mortgages	_____		
Real Estate	_____		
Miscellaneous Assets	_____		
			Amount
Corporate Trusts and Agencies	_____		Nonmanaged
Corporate and Municipal Trusteeships	_____	Personal Accounts	Accounts
Transfer Agent, Registrar, Paying Agent	_____	Personal Trusts	Accounts
and Other Corporate Agency	_____	Agency Accounts	(Number)
		Retirement Related Accounts	
Domestic Equity Funds	_____	Defined Contribution	
International/Global Equity Funds	_____	Defined Benefit	
Stock/Bond Blend	_____	Other Retirement Accounts	
Taxable Bond Funds	_____	Corporate Trusts and Agencies	
Municipal Bond Funds	_____	Investment Management	
Short Term/Money Market Funds	_____	Agency Accounts	
Specialty/Other Funds	_____	Other Fiduciary Accounts	
		Custody and Safekeeping Accounts	
TOTAL ASSETS	\$ _____	TOTAL LIABILITIES	\$ _____
Gross Overdrafts Included Above	\$ _____		

The assets listed above should be reflected at Market Value.

I hereby certify that the foregoing statement is a true statement of the trust assets as shown by the department/company books as of the close of business: \_\_\_\_/\_\_\_\_/\_\_\_\_

Name and Title of Officer	Name and Address of the Institution
Signature of Officer	Date Signed

This is an official document. Any false information contained in it may be grounds for prosecution and may be punished by fine and/or imprisonment.