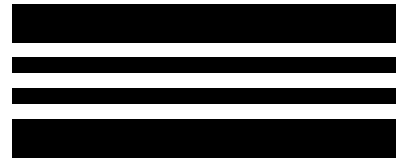




Endowment Care Fund Trustee Statement of Fiduciary Responsibility



To act as an endowment care fund trustee, you must file this Statement of Fiduciary Responsibility before beginning your duties. Your fiduciary responsibility will remain in effect until you inform us in writing that you have resigned as a trustee.



21701-SUPPORTING

To **register**, complete section A, then complete section B.
To **resign**, complete section A, then complete section C.

Mail the completed form to:

Funeral and Cemetery Board
Department of Licensing
PO Box 9012
Olympia WA 98507

For questions or language help call: 360.664.1555

A. Business information

Name of cemetery/endowment care association	
Address (Street address or PO Box, City, State, ZIP code)	
Name of trustee	
Address (Street address or PO Box, City, State, ZIP code)	
(Area code) Phone number	Email

B. Acceptance of endowment care fund trusteeship

<i>I hereby accept the appointment as an endowment care fund trustee.</i>	
_____	TYPE or PRINT Name
_____	X
Date and place	Signature of trustee

C. Resignation of endowment care fund trustee

<i>I hereby resign as trustee of the above named endowment care fund.</i>	
_____	TYPE or PRINT Name
_____	X
Date and place	Signature of trustee