TRANSFER ON DEATH DESIGNATION

GRANTOR(s), as Stockholder(s),	
TRANSFER ON DEATH TO:	
TOD Address	TOD Phone #
TOD Email	
As GRANTEE BENEFICIARY, all of the following	described share of stock: (Unit address)
I UNDERSTAND THAT THIS TRANSFER ON DEATH DESIGNATION IS REVOCABLE AT ANYTIME PRIOR TO MY DEATH AND DOES NOT TRANSFER ANY OWNERSHIP OF THE STOCK SHARE UNTIL MY DEATH. THIS TRANSFER ON DEATH REQUEST HEREBY REVOKES ALL OF MY PRIOR BENEFICIARY DESIGNATIONS AND IS EXECUTED PURSUANT TO K.S.A. 17-49a01, et seq.	
Executed this day of	, 20
Signature (Stockholder(s))	Signature (TOD to)
Print Name	Print Name
State of Kansas)) ss County of Wyandotte)	
On this day ofundersigned, a Notary Public in and for the county	, 20, before me, the y and state aforesaid, personally appeared
(Stockholder(s)) to me personally known to be the same person(s) who executed the within and foregoing instrument of writing and acknowledged to me that the same was executed as a free and voluntary act and deed for the uses and purposes therein set forth. IN WITNESS WHEREOF, I have hereunto set my hand and Notary Seal the day and year last above written.	
Notary Public	
My Commission Expires:	
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