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TRUST INFORMATION FORM

Court File No.: .....

COMMONWEALTH OF VIRGINIA

(For appointment of trustees for testamentary and intervivos trusts, including court-ordered trusts and structured settlements.)

Circuit Court of .....

1. Name of Estate or Settlor .....
2. Is this a trust created by a will? ☐ yes ☐ no. If yes, will is recorded in Book ..... Page .....
   or Clerk's Instrument No. ..... Date of Instrument .....
3. If court-ordered trust, date of order and case number .....
4. Name of person making request: .....
5. Mailing address .....
6. Basis for request: ☐ trustee named in will ☐ other (specify) .....
7. Name of person seeking appointment .....
8. Day telephone ..... Night telephone .....
9. Residence address .....
10. Mailing address, if different .....
11. Name of additional person seeking appointment .....
12. Day telephone ..... Night telephone .....
13. Residence address .....
14. Mailing address, if different .....
15. The value of the trust estate on this date is as follows:
    (a) Personal Property $ .....
    (b) Real Property $ .....
    TOTAL VALUE OF TRUST $ 0.00
16. Name of assisting attorney, if any ..... Telephone .....
17. Attorney's mailing address .....

I hereby certify that to the best of my knowledge and belief this is an accurate statement of facts, and I acknowledge a continuing legal duty to report any later discovered errors or inconsistencies to the Clerk of Court.

DATE	PRINTED NAME OF REQUESTING PERSON	SIGNATURE OF REQUESTING PERSON
.....	.....	_____

INFORMATION TO BE FURNISHED BY EACH PERSON SEEKING APPOINTMENT

18. Have you ever been convicted of a felony? ☐ yes ☐ no.
19. Have you ever filed for bankruptcy? ☐ yes ☐ no.
20. Are you now, or have you ever been, an attorney at law in Virginia or elsewhere? ☐ yes ☐ no. (If yes, and you do not now possess an active license from the Virginia State Bar, explain the details on a separate sheet of paper.)

I (we) hereby certify that to the best of my (our) knowledge and belief this is an accurate statement of facts, and I (we) acknowledge a continuing duty to report any later discovered errors or inconsistencies to the Clerk of Court.

DATE	PRINTED NAME OF PERSON SEEKING APPOINTMENT	SIGNATURE OF PERSON SEEKING APPOINTMENT
.....	_____	_____
DATE	PRINTED NAME OF PERSON SEEKING APPOINTMENT	SIGNATURE OF PERSON SEEKING APPOINTWIENT
.....	_____	_____

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VA. CODE § 26-1.2