

Alabama Family Trust

Phone: Toll Free 800.711.1303 Main 205.944.3987 Fax 205.944.3988
Mailing Address: 120 Oslo Circle, Birmingham, AL 35211-5965

Request for Disbursement

Name of Beneficiary: _____

Trust Account No (if known): _____

Requested by: _____

(Co-Trustee)

Telephone number: _____ e-Mail: _____

Payable to: _____

Address: _____

Account#: _____ **Amount:** _____

Purpose, which **must** be for or on the behalf of the beneficiary:

Receipts attached: Yes No This disbursement is medically necessary: Yes No

Under penalties of perjury, I declare that to the best of my knowledge and belief, this information is true, correct and complete.

X _____

Date: _____

A separate form should be completed for each payee.