

Certification of Safe-Deposit Box Contents

State of Florida

County of _____

On the _____ day of _____ (month), _____ (year), safe-deposit box number _____
rented in the name of _____ was opened by
_____ (name of financial institution) in my
presence and in the presence of _____ (name of officer).

The contents of the box consisted of the following: (Details Listed Below)

(Seal)

Notary's Signature

Notary's Name (printed, typed, or stamped)

Additional Details (if applicable): _____