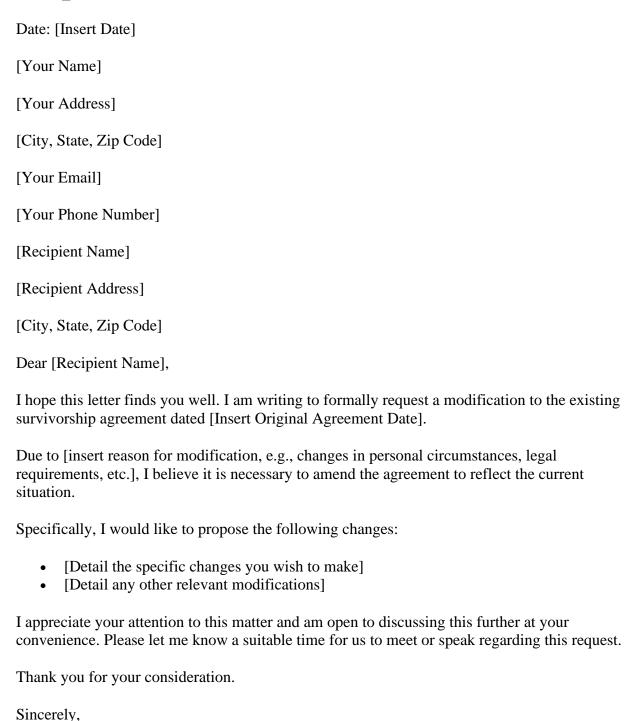
Survivorship Agreement Modification Request



[Your Name]