

STATE OF NORTH CAROLINA

File No.

In The General Court Of Justice
Superior Court Division
Before The Clerk

_____ County

IN THE MATTER OF THE ESTATE OF:

Name Of Decedent

Date Of Death

Name Of Decedent's Surviving Spouse, If Any

**APPLICATION AND ASSIGNMENT
YEAR'S ALLOWANCE**

G.S. 30-15, 30-21

I apply for an allowance for a year's support for the person(s) named below, and state:

1. The decedent died a resident of this county on the date shown above.
2. The surviving spouse named above is entitled to an allowance from the personal property of the decedent of the value of ten thousand dollars (\$10,000) for a year's support and has not forfeited that right, and the child(ren) named on the reverse side of this Application is entitled to an allowance of two thousand dollars (\$2,000) for a year's support.
3. I request assignment of ten thousand dollars (\$10,000) from the funds or other personal property of the decedent for a year's support for the surviving spouse named above and an additional two thousand dollars (\$2,000) for each child(ren) named on the reverse.

Name And Address Of Applicant (Type Or Print)

Date

Signature

Spouse Personal Representative Guardian ad Litem

ASSIGNMENT OF YEAR'S ALLOWANCE

I have examined the above application and have determined the money and other personal property of the decedent. I find that the allegations in the application are true and that each person(s) named in the application is entitled to the allowance requested.

I ASSIGN to the applicant the funds or other items of the personal property of the decedent listed below, which I have valued as indicated. This property is assigned free and clear of any lien by judgment or execution against the decedent and is to be paid by the applicant to the person(s) entitled. I assess as a DEFICIENCY the amount, if any, shown below, which is to be paid or delivered to the proper person when any additional personal assets of the decedent are discovered.

NAME OF ARTICLE	VALUE
	\$
TOTAL	\$
DEFICIENCY	\$

Date

Signature

Assistant CSC Clerk Of Superior Court Magistrate

CHILD(REN) ENTITLED TO ALLOWANCE			
NAME	AGE	RELATIONSHIP	ADDRESS