

**STATE OF NORTH CAROLINA**

File No.

Film No.

\_\_\_\_\_ County

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

**IN THE MATTER OF THE ESTATE OF:**

*Name Of Ward/Decedent*

*Social Security No.*

*Name And Address Of Guardian/Personal Representative*

**AUTHORIZATION TO  
RELEASE FUNDS**

G.S. 28A-8-1.1; 35A-1232

*Name Of Bank Or Insured Savings And Loan Association*

*Account No.*

*Amount On Deposit*

\$

**To The Bank Or Insured Savings And Loan Association Named Above:**

You are authorized to release the amount of \$ \_\_\_\_\_ to the guardian/personal representative named above. The funds remaining on deposit, if any, shall remain subject to the terms and conditions of the Receipt And Agreement on file with this office.

*Date*

*Signature*

Assistant CSC

Clerk Of Superior Court

**SEAL**