STATE OF NORTH CAROLINA	File No.
County	In The General Court Of Justice Superior Court Division Before The Clerk
IN THE MATTER OF THE ESTATE OF	411711071747101170
Name Of Ward/Decedent	AUTHORIZATION TO
	RELEASE FUNDS
	G.S. 28A-8-1.1; 35A-1232
Name And Address Of Guardian/Personal Representative	Name And Address Of Bank Or Insured Savings And Loan Association
	FOR GUARDIANSHIP ESTATES ONLY: Name And Address Of Bank, Savings And Loan Association, Credit Union, Trust Company, Or Registered Securities Broker Or Dealer
	Telephone No. Of Bank/Savings And Loan Association/Financial Institution Account No.
	Account No.
	Amount On Deposit \$
To The Bank/Insured Savings And Loan Association/Fina	ancial Institution Named Above:
You are authorized to release the amount of \$funds remaining on deposit, if any, shall remain subject to the terms	to the guardian/personal representative named above. The and conditions of the Receipt And Agreement on file with this office.
	Date
	Signature
	Assistant CSC Clerk Of Superior Court

SEAL