

# PROBATE COURT OF FRANKLIN COUNTY, OHIO

IN THE MATTER OF THE GUARDIANSHIP OF \_\_\_\_\_

CASE NO. \_\_\_\_\_

## RECEIPT AND RELEASE OF ALL CLAIMS

This day the undersigned makes application to the Probate Court for release of funds, including interest, deposited in:

Financial Institution	Account No.	Amount
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I, \_\_\_\_\_, acknowledge the accuracy of the balance of the above listed funds deposited in the noted financial institution(s). In consideration of the protection given my interest in the funds in the account(s) and in consideration of the release of the account(s), I hereby knowingly and voluntarily release Franklin County Probate Court, and all Court personnel from all actions, claims, damages and demands whatsoever which I now have or ever had or shall have which are associated with the receiving and holding of funds.

_____	_____
Date	Name
_____	_____
Witness	Signature

### NOTE:

If not signed in Probate Court, this must be signed before a notary public.

Acknowledged before me a Notary Public this \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

\_\_\_\_\_  
Notary Public