Approved, SCAO JIS CODE: PAR/VFD

## **STATE OF MICHIGAN** PROBATE COURT COUNTY

## PROOF OF RESTRICTED ACCOUNT AND **ANNUAL VERIFICATION OF FUNDS ON DEPOSIT**

FILE NO	FI	L	Ε	N	O
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Name of authorized representative  Title  I certity that the estate funds of the minor are currently on deposit with us under a restricted account as	
ordered by the court, and annually thereafter.  Name of financial institution/insurance company/brokerage firm  Address  Tele  Name of authorized representative  Title  I certity that the estate funds of the minor are currently on deposit with us under a restricted account as  Type of account  Account number  Bala	, minoi
Address  Name of authorized representative  Title  I certity that the estate funds of the minor are currently on deposit with us under a restricted account as  Type of account  Account number  Bala	ualification, or as otherwise
Name of authorized representative  I certity that the estate funds of the minor are currently on deposit with us under a restricted account as  Type of account  Account number  Bala	
I certity that the estate funds of the minor are currently on deposit with us under a restricted account as  Type of account  Account number  Bala	elephone no.
Type of account Account number Bala	
	as follows:
Account caption (include name of conservator)	alance
Attached is a copy of the corresponding financial institution's statement.*  I further certify that  The funds, including accruals, shall not be released or withdrawn except by written order of this cout.  Records have been marked to prohibit withdrawal except by written order of this court.  We are liable for funds released or withdrawn without written order of this court.	ourt.
Date Signature of authorized representative	
* For annual verification, the corresponding financial institution's statement must be dated within 30 days annual accounting period.	ys after the end of the
Do not write below this line - For court use only	