COUN	TY O	ΓΕ'S COURT : STATE OF NEW YORI F DELAWARE				
Voluntary Accounting Proceeding,			X File No			
Estate			FULL RELEASE OF FIDUCIARY			
		Deceased.				
	The u	undersigned	, residing at, being of full age and under no disability			
	IOWL	EDGES FULL PAYMENT AND RECE above-named Decedent as appears below	IPT of the share to which the undersigned is entitled in the			
	Paym	nent Made by:  (Name of Representati	ve)			
	In Ca	· ·	Amount of Payment \$			
		(Capacity of Representative)				
	Purpo	ose of Payment: IN FULL OF: (Check Undersigned's gift under dece				
		Undersigned's distributive sha	are in Decedent's estate; or			
		Entire estate to surviving spou	se; or			
	In con	nsideration of said payment, the undersign	gned hereby:			
	(1)	(1) RELEASES AND DISCHARGES forever the representative(s) above-named of and from a responsibility and liability of every nature to the undersigned by the reason of any and all matter relating to, or derived from, said estate and its administration; and				
	(2) REQUESTS AND EMPOWERS the Surrogate of Delaware County, upon filing this instrument, to make and enter the proper decree fully and finally releasing and discharging the said representative(s) as to the undersigned; and					
	(3) WAIVES the issuance and service of a citation to attend any and all judicial settlements of accounts of said representative(s); and					
	(4)	APPEARS voluntarily in any proceeding instituted for such judicial settlement and authorizes the personal appearance of the undersigned to be entered on the record.				
Dated:		, 20	THIS IS A FULL RECEIPT, RELEASE AND WAIVER - READ BEFORE SIGNING			

## INDIVIDUAL ACKNOWLEDGMENT

STATE OF	)			
		ss:		
COUNTY OF	)			
On the	day of		, 20	, before me, the undersigned, a Notary Public
	e, personally appeared		,	, personally known to me of
proved to me on the	basis of satisfactory ev	idence to	be the indi	ividual(s) whose name(s) is/are subscribed to the
within instrument a	nd acknowledged to me	that he/sl	he/they exe	ecuted the same in his/her/their capacity(ies), and
that by his/her sign	nature(s) on the instru	ment, the	e individu	al(s), or the person upon behalf of which the
individual(s) acted,	executed the instrumer	nt.		
			Notary Pu	ıblic