

6) As surviving heir to the Estate of _____, I am requesting the
Name of Deceased
release of the unclaimed funds.

Dated: _____ By: _____
Signature(s) of Heir(s)

STATE OF: _____ . CITY of _____

On _____ before me, personally appeared _____
personally known to me (or proved to me on the basis of satisfactory evidence) to be the
person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that
he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their
signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s)
acted, executed the instrument. WITNESS my hand and official seal.

Notary Public

My commission expires on _____.