

IN THE CIRCUIT COURT OF THE STATE OF OREGON
FOR THE COUNTY OF CLACKAMAS

In the Matter of the ___ Conservatorship ___ Estate of _____, _____, ___ Deceased ___ Minor ___ Incapacitated.)))))))	CASE NO. _____ ACKNOWLEDGMENT OF RESTRICTION OF ASSETS
---	---------------------------------	--

We acknowledge receipt of a copy of the court order signed on _____, _____ that restricts access to the assets of the above estate/conservatorship as described below. We will not allow ANY distribution or withdrawal of principal or income from these assets or use of the assets as security for any obligation without specific authority by court order, except as allowed by this Order unless modified by a subsequent Order of this Court. We will not close the account without Court Order. We will provide the Court with at least 30 days prior written notice with any intent to close for any other reason. The Order allows the conservator to make withdrawals from the restricted assets as follows:

___ None ___ Other conditions or restrictions:

The assets on deposit with us that are subject to the Order are identified as follows:

Account Number(s):	Name/Title of Account	Balance of Account	Dividends/Interest (<i>check one</i>)
_____	_____	_____	___ Distributed to Estate
_____	_____	_____	___ Reinvested into acct
_____	_____	_____	___ Distributed to Estate
_____	_____	_____	___ Reinvested into acct
_____	_____	_____	___ Distributed to Estate
_____	_____	_____	___ Reinvested into acct

(You may list any other accounts subject to the Court's Order on the back of this form)

The name of the holder of the account shown on our records is _____.

We understand that the conservator may do the following without court order: (1) transfer restricted assets to other accounts with us that are subject to the restrictions stated above; and (2) change the investment of assets, as long as all assets remain in an account with us subject to the restrictions stated above.

We agree to abide by the Order. We understand that if assets are removed from a restricted account without prior court order, this institution shall be required to pay the value of those assets to the estate/conservatorship.

DATE: _____, 20____.

Financial Institution: _____

Address: _____

**NOTE: THIS DOCUMENT MUST BE SIGNED
 BY AN OFFICER OR OTHER PERSON
 AUTHORIZED TO BIND THE INSTITUTION**

By: _____

Printed name: _____

Title: _____