

**IN THE CIRCUIT COURT OF THE STATE OF OREGON
THIRD JUDICIAL DISTRICT
Probate Department**

In the Matter of the: _____)
) Case No. _____
☐ Conservatorship ☐ UTMA Account of: _____)
) **AFFIDAVIT AND**
) **ACKNOWLEDGMENT OF**
_____) **RESTRICTION**
A Protected Person.)

STATE OF OREGON _____)
) ss.
County of _____)

I, _____, being duly sworn, depose and say:

1. I am employed by _____ in the capacity of _____*. In this capacity, I am aware of the existence and status of the following ☐ conservatorship ☐ Uniform Transfers to Minors Act (UMTA) account:

Account number: _____	Dividends/interest income are:
Account balance: \$ _____	<input type="checkbox"/> Reinvested/remain in the account
Share value: \$ _____	<input type="checkbox"/> Other: _____
Number of shares: _____	

2. This institution has received a copy of the court order signed on _____, 20____ that restricts the above account and provides that no disbursements may be made from the account without a court order. By accepting this account, this institution agrees to abide by and be bound by that order, and to be subject to the jurisdiction of the court that entered that order. The restriction shall continue until the court orders that the restriction terminate or the protected person reaches age 18, whichever occurs first.

3. I certify that the account described above is listed with this institution as a restricted account, from which funds shall be disbursed only upon court order. I further certify that this restriction is noted system wide in the computer network of this institution.

Date: _____

Name of Financial Institution

***NOTE: THIS AFFIDAVIT MUST BE SIGNED BY
THE BRANCH MANAGER OR EQUIVALENT**

By: _____
Title: _____

SUBSCRIBED AND SWORN to before me this _____ day of _____, 20____.

NOTARY PUBLIC FOR OREGON
My Commission expires: _____