

**CIRCUIT COURT OF CLAY COUNTY, MISSOURI
PROBATE DIVISION**

No. _____

Matter of _____, *minor - *disabled.

VERIFICATION OF RESTRICTED DEPOSIT OF SECURITIES

The undersigned hereby certifies that ___he is an official of the below named depository, which had a deposit on the _____ day of _____, 20____, the following described securities for safekeeping in the name of _____, as Conservator of the estate of _____, *minor____, *disabled____.

There are no other names on the account(s) except as follows: _____
_____.

Said deposits of securities have been made and accepted with the specific contract and agreement that they are subject to the order of the Probate Division of the Circuit Court of Clay County, Missouri and, no withdrawals will be permitted from such deposit except on the order of the Court.

Stocks, Bonds, Notes, etc	Serial Numbers	Interest Rate	Date of Maturity	Face Value, If Any

THE STATEMENTS AND REPRESENTATIONS IN THIS DOCUMENT ARE MADE UNDER OATH AND ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I UNDERSTAND THEY ARE MADE SUBJECT TO THE PENALTIES OF MAKING A FALSE AFFIDAVIT OR DECLARATION.

Date: _____

Depository: _____

Address: _____

By: _____
TYPE OR PRINT NAME

SIGNATURE (REQUIRED)

Title: _____

***strike if inapplicable**

