

IN THE PROBATE COURT OF DELAWARE COUNTY, OHIO

Guardianship of
Trust of
Estate of _____

Case No. _____

**MOTION FOR AUTHORITY TO EXPEND FUNDS FROM
A RESTRICTED ACCESS CUSTODIAL ACCOUNT**

Request is made by the _____ Guardian of the estate of the minor or the incompetent
_____ Trustee of the above named trust, _____ Fiduciary of the above named estate, for
authority to expend funds from the restricted access custodial funds in this matter and in
support of the request represents to the Court that the request is for the best interest of the
ward or beneficiary. The request is as follows:

**(State the amount requested, the nature and purpose for the expenditure, the
frequency and duration of the request if more than a single request. Attach
supporting documentation and explain why the need cannot be met from
other resources available to the ward or beneficiary or from those otherwise
responsible for the care and support of the ward, if a minor.)**

Depository: _____

Account No.: XXXX- _____

Attorney's Signature

Applicant's Signature

Attorney's Printed Name; Sup Ct. # _____

Applicant's Printed Name