

SUPREME COURT OF THE STATE OF NEW YORK
COUNTY OF _____

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In the Matter of the Final Account
of _____ as Guardian
for _____, deceased person

Index No. _____

AFFIDAVIT
(In Support of Order for
Discharge)

-----X

STATE OF NEW YORK)
) SS.:
COUNTY OF _____)

_____, being duly sworn, deposes and states:

1. That I have fully complied with all of the provisions of the Order Settling the Final Account of my duties as _____, signed by the Honorable _____, dated _____.

2. A copy of said Order has been duly served upon all interested parties.

3. An Updated Verified Statement has been prepared indicating the balance of the funds in the account as of the date of the Final Account, showing additional interest credited, and indicating payments made pursuant to the Order of _____. The Updated Statement was verified by _____ as _____, sworn to on the ____ day of _____, _____. The Updated Verified Statement is hereto attached.

4. Also attached is the letter of transmittal to the attorneys for _____ Hospital, namely _____, whereby they acknowledged receipt of the two (2) checks payable to _____ Hospital; enclosed are copies of the two (2) checks after they cleared the bank.

5. There presently are no funds held by the Guardian. The bank balance is currently zero.

6. This is being submitted to the Court, with the request that the attached Order be signed, discharging _____ as the Guardian and the surety, _____, and that the bond be discharged and cancelled.

7. No prior application for the same or similar relief has been made herein.

s/ _____
[Name of Guardian]