## SUPERIOR COURT OF THE DISTRICT OF COLUMBIA PROBATE DIVISION

A	ADM
	INT
	IDD
(	GDN
	TRP

Estate of

Minor/Ward/Deceased

## RECEIPT

I, the undersigned,	(insert name)	hereby
acknowledge to have receive	(insert name) ed from (insert name)	
(personal representative/cor	(insert name) nservator/guardian/trustee), of	the estate
of		assets consisting
of		
as shown by the approved _	account	in said cause on
, 20	<u> </u>	
	Signature of filer	
Typed name of filer		
	Address (actual address/not Post Office Box)	

Telephone number

Email address

Unified Bar number (if filer is an attorney)