

THE STATE OF NEW HAMPSHIRE
JUDICIAL BRANCH
http://www.courts.state.nh.us

Court Name:
Case Name:
Case Number: (if known)

RECEIPT

1. RECEIVED FROM _____, serving as:

- Executor Administrator Special Administrator
Guardian Conservator Trustee
Ancillary Executor or Administrator

2. The amount of money after all debts of the deceased are paid, and or personal property as valued in the Inventory:

\$ _____, in full partial satisfaction of the following:

For Estate:

- Money bequeathed under decedent's will
Personal property bequeathed under decedents will (specify)

- Residuary share under decedent's will
Distributive share of decedent's estate when there is no will

For Guardianship or Conservatorship

- Balance upon termination of guardianship
Balance upon termination of conservatorship

For Trust

- Distribution(s) according to terms of trust
Distributive share upon termination of trust

Other (specify) _____

RECEIVED BY:

Name of Recipient

Signature of Recipient Date

Law Firm, if applicable Bar ID # of attorney

Telephone

Address

E-mail

City State Zip code