

# REGISTRY FUNDS WITHDRAWAL REQUEST

**Submit in Person to: Yolanda Stephens or Via Email: stephensy@co.grayson.tx.us**

Order Date: \_\_\_\_\_

Cause No: \_\_\_\_\_

Style of Case: \_\_\_\_\_

**Requesting Party Information:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Relationship to Payee: (circle one)      Self      Attorney      Parent/Guardian

State of Texas Bar Number (if applicable): \_\_\_\_\_

Method of Disbursement: (circle one)      Mail      Pick up in person

**Recipients Information:**

Same as Requestor:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Payable To: \_\_\_\_\_ (Valid Photo ID or birth certificate AND social security card ARE REQUIRED.)

Amount: \$ \_\_\_\_\_

Applicants Signature: \_\_\_\_\_

**\*\* A valid Photo ID or Birth Certificate AND a copy of a valid social security card are required when claiming funds.**

**\*\* Pursuant to Texas Local Government Code §117.055, an Administrative Fee of 5% up to \$50.00 of the total will be deducted if the funds were not invested.**

**\*\* Pursuant to Texas Local Government Code § 117.054, an Administrative Fee of 10% of the accrued interest will be deducted if the funds were invested.**

**Office Use Only: Check #:** \_\_\_\_\_

Deputy Clerk: \_\_\_\_\_