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John R. Doe Estate

RECEIPT, RELEASE AND WAIVER OF ACCOUNTING

Dated: April 10, 9999

In the Matter of the Estate of John R. Doe, Deceased File No. # 9999-XXXX

Surrogate's Court, County of Queens of the State of New York, I,

_____(full name), residing at
9999 Sample Street, Apt 99, Flushing, New York, 11354, being duly sworn,
depose and say:

1. **I am a beneficiary** identified in the Last Will and Testament presented to the said court, entitled to share in proceeds from the Estate of John R. Doe (the "Decedent"), who died on April 1, 9999, a resident of the County of Queens, State of New York.

2. **Letters Testamentary**/Certificate of Appointment of Executor, Certificate # XXXXXX, were issued to Doe (the "Executor/Fiduciary") by the Surrogate's Court, County of Queens, State of New York, on November 30, 9999.

3. **Receipt.** I hereby agree to acknowledge receipt from the Executor/Fiduciary of the following:

The sum of \$3,943.11 (75% in 2023) and \$1,213.24 (portion after expenses per calculation on **Summary of Breakdown** line #99, dated 12/2025) represents my final distributive share of the principal and income of the Estate. I have reviewed the Account SB Estate Spreadsheet and Cornerstone Savings Bank Estate Account Statements provided as of January 9999.

4. Release and Discharge:

In consideration of the distribution described above, I hereby release and forever discharge the Executor/Fiduciary, personally and in his/her fiduciary capacity, from any and all claims, demands, obligations, liabilities, causes of action or suits, of whatsoever kind.

5. Waiver of Formal Accounting:

I hereby acknowledge that:

- a. I have received an accounting setting forth all the assets of the Estate, bank statements, all income received, all disbursements made, and the proposed distribution of the remaining assets;

- b. I have had the opportunity to examine said accounting records.
- c. All of my questions concerning the Estate and its administration have been received, acknowledged, and responded to, regardless of dissent on methods and/or decisions within the Fiduciary's discretion, and
- d. I expressly waive the filing and judicial settlement of a formal accounting by the Executor/Fiduciary and consent that the Estate be settled without further notice.

I understand that by signing this Receipt, Release and Waiver of Accounting, I am waiving my rights, including my right to compel formal judicial accounting at the expense of all beneficiaries and my right to object to the Executor/Fiduciary's administration of the Estate.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this _day of, 2026.

_____ [Signature of Beneficiary]
_____ [Printed Full Name of Beneficiary]

STATE OF NEW YORK ss.: COUNTY OF _____.

On the _____ day of _____ in the year 2026, before me, the above signed, a Notary Public in and for said State, personally appeared _____, personally known to me or proved to me on the basis of satisfactorily evidence to be the person(s) whose name(s) is subscribed to the instrument and acknowledged to me that he/she executed the same in his/her authorized capacity and that by his/her signature on the instrument is the person or entity on behalf of which the person acted, that executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of New York that the foregoing paragraph is true and correct. Witness my hand and official seal.

Notary Signature: _____ SEAL:

Notary Print Name: _____