

State of New Jersey Middlesex County Surrogate's Court

In the Matter of the Estate of

CONSENT FOR RELEASE OF ASSET INFORMATION

_____, Deceased
(Decedent's name)

Docket Number:

aka: _____
(Also known as, if any)

TO THE SURROGATE OF THE COUNTY OF MIDDLESEX

STATE OF NEW JERSEY

BE IT KNOWN, that the undersigned, next of kin of _____, late of
(Decedent's name)

_____, in said County of _____,
(Decedent's city of residence) (County of residence)

do hereby consent to have _____, receive the ASSET INFORMATION ONLY of
(Your name)

the above named decedent for the use and benefit of all the next of kin.

(Signature)

DATE:

Signed in the presence of:

NOTARY PUBLIC