DATA REQUIRED FOR INVESTMENT OF FUNDS

DATE:_____

CAUSE NUMBER:_____

NAME IN WHICH FUNDS ARE TO BE INVESTED **TELEPHONE #**

ADDRESS **CITY** **STATE** **ZIP**

SOCIAL SECURITY NUMBER **DATE OF BIRTH**

TAX ID NUMBER (IF APPLICABLE) **TELEPHONE #**

NAME OF ATTORNEY **TELEPHONE #**

ADDRESS **CITY** **STATE** **ZIP**

ATTORNEY AD LITEM **TELEPHONE #**

ADDRESS **CITY** **STATE** **ZIP**

******GUARDIAN INFORMATION ******

NAME: _____

ADDRESS: _____

TELEPHONE #: _____

***** DISTRICT CLERK REQUIRES ALL OF THE ABOVE INFORMATION TO INVEST FUNDS*****

- FUNDS MAY ONLY BE WITHDRAWN UPON SUBMISSION OF A RECENTLY SIGNED COURT ORDER
- UPON WITHDRAWAL OF FUNDS FROM INVESTMENT ACCOUNT, AN ADMINISTRATIVE FEE EQUAL TO 10% OF INTEREST EARNED WILL BE ASSESSED. (SEC. 117.055 LOCAL GOVERNMENT CODE)