

ATTORNEY OR PARTY WITHOUT ATTORNEY STATE BAR NUMBER: NAME: FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO.: EMAIL ADDRESS: ATTORNEY FOR (<i>Name</i>):	<i>FOR COURT USE ONLY</i>
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
CASE NAME:	
ORDER AUTHORIZING WITHDRAWAL OF FUNDS FROM BLOCKED ACCOUNT	CASE NUMBER:

1. The petition of (*name*): _____ to withdraw funds
- a. was heard ex parte.
- b. came on regularly for hearing in this court on (*date*): _____

THE COURT ORDERS

2. Petitioner is authorized to withdraw, and the depository is ordered, on presentation of a file-stamped copy of this order, to permit the petitioner to withdraw, funds in the total amount of: \$ _____
3. The funds are held in the following account:
- a. Name and title on account:
- b. Depository (*name*):
- (1) Branch (*name*):
- (2) Address:
- c. Account number:
4. The funds are to be distributed by the depository, remittance payable as follows:
- a. Payee (*name*):
- (1) Address:
- (2) Amount: \$ _____
- b. Payee (*name*):
- (1) Address:
- (2) Amount: \$ _____
- c. Payee (*name*):
- (1) Address:
- (2) Amount: \$ _____
- Additional payees and amounts to be distributed are listed on Attachment 4.
5. The court further orders:

6. Number of pages attached: _____

Date:

JUDICIAL OFFICER

SIGNATURE FOLLOWS LAST ATTACHMENT

