

STATE OF VERMONT

SUPERIOR COURT
Unit

PROBATE DIVISION
Case No. _____

In re:

**RECEIPT FOR DELIVERY & REMOVAL OF ORIGINAL
LAST WILL AND TESTAMENT FROM SAFEKEEPING**

Testator Name: _____

The undersigned hereby acknowledges that **he/she/they** is/are removing their original Last Will and Testament, and any Codicils thereto, from the Vermont Superior Court, Probate Division, on _____ that were filed for safekeeping.
(date)

- The testator has provided valid photo identification.
- The testator has provided a witnessed and notarized letter to the Court requesting that the Last Will and Testament, and any Codicils filed, be mailed to them as they no longer live in the State of Vermont and cannot collect their documents in person.

Date

Signature of Testator

Address: _____

Phone No.: _____

Date

Signature of Court Staff Releasing Documents