

DECLINATION AS PERSONAL REPRESENTATIVE

I/We, _____ and
_____ named as beneficiary(ies) of the
will of _____, do hereby decline to serve
as Personal Representative of said will.

Dated this _____ day of _____, 20____.

Signature

Signature

STATE OF: _____

COUNTY OF: _____

I, _____, a notary public in and for
said state, do hereby certify that _____
and _____, whose name(s) is/are signed
to the writing above, has/have this day acknowledged the same before me.

Given under my hand this _____ day of _____, 20____.

My Commission expires _____.

Notary Public