

Register of Wills of Lackawanna County, Pennsylvania

RENUNCIATION

Estate of _____ No. _____

Also known as _____

_____, Deceased

The undersigned, _____
(Relationship) (Capacity)

of the above Decedent, hereby renounce(s) the right to administer the estate and respectfully request(s) that Letters be issued to _____

WITNESS _____ hand this _____ day of

_____, 200__

(Signature)

(Address)

(Signature)

(Address)

(Signature)

(Address)

Sworn to or affirmed and subscribed
Before me *this* _____ day

of _____ 200 _____
Notary Public

My Commission Expires:
(Signature and seal of Notary or other official
qualified to administer oaths. Show date of
Expiration of Notary's Commission.)

NOTE: Renunciations executed outside the
Register of Wills Office must be
notarized.