

**REGISTER OF WILLS IN AND FOR KENT COUNTY
STATE OF DELAWARE**

To: Harold Brode
Register of Wills

Sir/Madam:

I, _____ (your name)
of _____ (street address)

_____, (city, ST, zip)
_____ (relationship to decedent)
of _____ (deceased full name),
late of _____ (town/residence of deceased)
do hereby renounce my right and power of administration on the estate of said deceased and appoint
_____ I do solemnly announce my refusal thereof.

GIVEN UNDER MY HAND, this day of month day of month, year.

X _____
(Signature)

SWORN AND SUBSCRIBED before me the day and year aforesaid.

X _____
Notarial Officer

My Commission Expires: _____