

IN THE ORPHANS' COURT FOR
(OR)
BEFORE THE REGISTER OF WILLS FOR

_____, MARYLAND

IN THE ESTATE OF:

ESTATE NO. _____

ELECTION TO TAKE ELECTIVE SHARE OF ESTATE

I, _____, surviving spouse of _____,

late of _____
County (City)

elect to take my elective share of the decedent's estate subject to election under § 3-403 of the Estates and Trusts Article of the Annotated Code of Maryland.

Witness:

Surviving Spouse

Date: _____

Attorney

If there is no attorney:

Address

Surviving Spouse's Address

Telephone Number

Surviving Spouse's Telephone Number

Facsimile Number

Surviving Spouse's Facsimile Number

Email Address

Surviving Spouse's Email Address