



# Office of the Fiduciary Supervisor

Kanawha County Commission

P.O. Box 3627, Charleston, WV 25336

(304) 357-0125

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## Declination as Executor/Executrix

I, \_\_\_\_\_, named as the Executor/Executrix of the will of \_\_\_\_\_, do hereby decline to serve as Executor/Executrix of said will.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
(Signature)

State of: \_\_\_\_\_

County of: \_\_\_\_\_

I, \_\_\_\_\_, a Notary Public in and for said State, do hereby certify that \_\_\_\_\_, whose name is signed to the writing above, has this day acknowledged the same before me.

Given under my hand this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

My commission expires \_\_\_\_\_.

\_\_\_\_\_  
(Notary Public)