

PROBATE COURT OF _____ COUNTY, OHIO

ESTATE OF: _____

CASE NO. _____

**CITATION TO SURVIVING SPOUSE TO
EXERCISE ELECTIVE RIGHTS
[R.C. 2106.01 and 2106.02]**

To: _____
Name of Surviving Spouse

Address

City, State, Zip Code

You are hereby cited to elect to exercise your rights as surviving spouse. A summary of these rights is attached and incorporated herein. These rights include the right to elect against the will. Most of the rights must be exercised within five months from the date of the initial appointment of the administrator or executor. If you do not timely elect to exercise any specific right, it will be conclusively presumed you have elected not to exercise that right and the right will be forfeited. If you have questions concerning your rights, you should consult an attorney of your choice.

The date of appointment of the administrator or executor is: _____.

The address of the probate court is: _____
_____.

The names and addresses of the executor or administrator and his or her attorney are:

_____ Attorney for Applicant	_____ Name
_____ Attorney Registration No.	_____ Title
_____ Address	_____ Address
_____ Phone Number (include area code)	_____ Phone Number (include area code)

Date: _____

By: _____
Deputy Clerk