

Commonwealth of Massachusetts

TO THE PROBATE COURT:

Plymouth, ss

Docket No: _____

RESPECTFULLY represents _____

of _____, in the County of _____
that _____

late of _____ in said County of Plymouth, _____ deceased,
testate, by ___ h ___ last will and testament, proved and allowed on the _____ day of
_____ 20 _____, in said Court - by a written instrument dated _____ 20 _____,
and a copy of which is filed herewith, recorded in the _____ Registry of Deeds in Book _____
Page _____, and _____

did therein give certain estate in trust for the use and benefit of _____

_____ and _____ w _____ duly appointed
trustee thereof, and ha _____ before the objects of said trust have been accomplished; that there is no
adequate provision made in said will - instrument - _____ for supplying the vacancy caused by said
_____ that your petitioner _____ willing to accept said trust, and give bond
according to law, for the faithful discharge thereof; ___ h ___ therefore pray ___ that ___ h ___ , or some
other suitable person, be appointed trustee - as aforesaid, in place of _____,
and that ___ h ___ may be exempt from giving surety on ___ h ___ bond - according to the provisions of the law in
such case made and provided.

Dated this _____ day of _____, 20_____ .

The undersigned, being all persons interested, hereby assent ___ to the foregoing petition - and consent that the petitioner
- be exempt from giving any surety on ___ h ___ bond.

DECREE

All persons interested having been notified in accordance with the law and no objections being made thereto, it is decreed that

_____ of _____ in the County of _____ be appointed trustee first giving bond
with _____ sureties for the due performance of said trust.

Date _____

Judge of Probate and Family Court

For Petitioner:

Tel. No. _____

For Respondent:

Tel. No. _____

Publication in the _____

Docket No. _____

**TRUSTEESHIP
TO FILL VACANCY UNDER WILL -
INSTRUMENT IN WRITING**

With (out) Sureties

Petition - Citation - Decree

Filed _____ 20 _____

Citation Issued _____ 20 _____

Returnable _____ 20 _____

Allowed _____ 20 _____

Recorded Vol. _____ Page _____