

STATE OF MINNESOTA

COUNTY OF _____

JUDICIAL DISTRICT
DISTRICT COURT
PROBATE DIVISION

Court File No. _____

Estate of

_____ ,

Decedent

**PETITION FOR ELECTIVE SHARE
OF AUGMENTED ESTATE**

I, _____, state:

1. My address is: _____.
2. I am an interested person as defined by Minnesota law because I am the surviving spouse of the Decedent.
3. The Decedent and I were married on _____, and remained married until the death of the Decedent.
4. I now exercise my rights as surviving spouse to take an elective share of the Decedent's augmented estate under Minnesota Statutes sections 524.2-201 through 524.2-214.

WHEREFORE, I request the Court fix a time and place for a hearing on this Petition and enter an order formally:

1. Determining the amount of my share of the Decedent's augmented estate and ordering its payment to me from the assets of the augmented estate or by contribution; and
2. Granting such other relief as may be proper.

Under penalties for perjury, I declare or affirm that I have read this document and I know or believe its representations are true and complete.

Dated: _____

Petitioner

Attorney for Petitioner
Name _____
Firm _____
Street _____
City, State, ZIP _____
Attorney License No: _____
Telephone: _____
FAX: _____
Email: _____

SAMPLE DOCUMENT