

**IN THE ORPHANS' COURT FOR**  
*(OR)* \_\_\_\_\_, **MARYLAND**  
**BEFORE THE REGISTER OF WILLS FOR**

**IN THE ESTATE OF:** \_\_\_\_\_ **ESTATE NO.** \_\_\_\_\_

**ELECTION TO TAKE ELECTIVE SHARE OF ESTATE**

I, \_\_\_\_\_, in my capacity as the  
specifically authorized guardian or agent of \_\_\_\_\_,  
surviving spouse of \_\_\_\_\_,  
late of \_\_\_\_\_,  
County (City)

pursuant to § 3-405 (b) of the Estates and Trusts Article of the Annotated Code of Maryland,  
hereby exercise the surviving spouse's election to take the surviving spouse's elective share of  
the decedent's estate pursuant to § 3-403 of the Estates and Trusts Article.

Witness:

\_\_\_\_\_

\_\_\_\_\_  
Guardian/Agent's Signature

Date: \_\_\_\_\_

\_\_\_\_\_  
Attorney

If there is no attorney:

\_\_\_\_\_  
Address

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Guardian or Agent's Address

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Guardian or Agent's Telephone Number

\_\_\_\_\_  
Facsimile Number

\_\_\_\_\_  
Guardian or Agent's Facsimile Number

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Guardian or Agent's Email Address