State of Rhode Island
Probate Court

DATE FILED
FOR COURT USE ONLY

DEDIMUS POTESTATEM

RIGL 8-9-17

STATE OF RHODE ISLAND
County of **Select County**
Estate of
Alias

PROBATE COURT OF THE
City or Town of **Select City or Town**
No.

To:

Name of Person Appointed to take Deposition

Street Address

City/Town | State | Zip Code | Phone Number

Whereas said Court now in session has, on motion of:

(name of Fiduciary)

granted a dedimus potestatem to take the deposition of:

(name of person appointed to take deposition)

Street Address

City/Town | State | Zip Code | Phone Number

to be used in the matter of

(name of Deceased or Ward's estate)

here pending. Said Court in full confidence of your fidelity and ability has appointed you to take said deposition.

If, therefore you accept said appointment, you are hereby requested to proceed and execute the duties thereof, agreeably to the Laws of this State authorizing and regulating the taking of depositions.

Witness:

Name of Probate Judge

Signature of Probate Judge | Date

Name of Probate Clerk

Signature of Probate Clerk | Date