

**OBJECTION TO REOPENING ESTATE****STATE OF RHODE ISLAND**

County of _____

Estate of _____

Alias _____

PROBATE COURT OF THE

City or Town of _____

No. _____

1. The fiduciary, _____ has/have

(name) (title)
reopened the above estate pursuant to [RIGL 33-14-13](#) to distribute assets discovered after the initial probate was filed.

2. I, the undersigned petitioner, do hereby object to the proposed distribution:Name of
Petitioner:Relationship to
Deceased

Street Address _____

City/Town _____

State _____

Zip Code _____

And my reasons for objecting are as follows:

_____**Petitioner:** To the best of my knowledge or belief, the statement(s) contained within this document are truthful and accurate.Signature of
Petitioner

PETITIONER SIGN HERE

Date _____

Notary:Name of
Notary

State _____

County _____

On _____ day of _____, 20____ the petitioner, known to me or proved through satisfactory evidence, signed the document in my presence and swore or affirmed the statements in the documents are truthful and accurate.

Signature of
Notary Public

NOTARY SIGN HERE

Date _____

Commission ID# _____

Commission Expiration Date _____

Notary Seal _____