

THE STATE OF NEW HAMPSHIRE
JUDICIAL BRANCH
http://www.courts.state.nh.us

Court Name:
Case Name: Estate of
Case Number: (if known)

MOTION TO PROVE WILL BY DEPOSITION

- 1. Petitioner Name Telephone Mailing Address
2. Attorney Name Telephone Mailing Address Bar ID#
3. Deceased Name Date of Death Residence Street City State
4. Witness to be deposed
5. Other subscribing witnesses
6. Reason witnesses cannot appear in court

The petitioner(s) request(s) that, a duly appointed notary public whose mailing address is, be appointed commissioner to take the deposition of the witness to be deposed in relation to the execution of the will. This witness is being deposed for the following reason:

I state that on this date I am sending a copy of this document as required by the rules of the Circuit Court. I am electronically sending this document through the court's electronic filing system to all attorneys and to all other parties who have entered electronic service contacts (email addresses) in this case. I am mailing or hand-delivering copies to all other interested parties.

Name of Filer Signature of Filer Date
Law Firm, if applicable Bar ID # of attorney Telephone
Address E-mail
City State Zip code

Case Name: _____

Case Number: _____

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_____/s/_____
Name of Filer Signature of Filer Date

Law Firm, if applicable Bar ID # of attorney Telephone

Address E-mail

City State Zip code

ORDER

Appointment and authorization to take the deposition is granted.

Appointment and authorization to take the deposition is denied.

Recommended:

Ordered by the Court: