



WHEREFORE the undersigned asks that the Court grant the relief requested.

Oral hearing requested. (I understand that I must attend if the Court chooses to hold a hearing.)

Oral hearing not requested.

Signature of attorney

Signature

\_\_\_\_\_  
Typed name of attorney

\_\_\_\_\_  
Typed Name

\_\_\_\_\_  
Address (Actual address/not Post Office Box)

\_\_\_\_\_  
Address (Actual address/not Post Office Box)

\_\_\_\_\_  
Telephone number

\_\_\_\_\_  
Telephone number

\_\_\_\_\_  
Email address

\_\_\_\_\_  
Email address

\_\_\_\_\_  
Unified Bar number

\_\_\_\_\_  
Bar number (if filer is an attorney)

The filing fee is enclosed in the form of a check or money order payable to "Register of Wills" in the amount of \$25.00.

### CERTIFICATE OF SERVICE

I certify that on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, a copy of this filing was either eServed in accordance with the provisions of Administrative Order 13-15 or served by first class mail, postage prepaid, on the following persons (list names and complete mailing addresses):

\_\_\_\_\_  
Signature

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA**  
PROBATE DIVISION

\_\_\_\_\_  
\_\_\_\_\_  
INT  
IDD

In re:

\_\_\_\_\_  
Ward

**ORDER REGARDING RESPONSE TO PETITION POST APPOINTMENT**

Upon consideration of the Objection (Exception) to Fee Petition filed on \_\_\_\_\_, 20\_\_\_\_\_, it is hereby this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_,  
ORDERED that \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ORDERED that a hearing will be held on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_,  
at \_\_\_\_\_ a.m./p.m. in courtroom \_\_\_\_\_ before Judge \_\_\_\_\_.

\_\_\_\_\_  
JUDGE

Copies to:  
(Insert list of names and addresses of all interested persons. Attach additional sheet if necessary.)

CC: