VIRGINIA:

IN THE CIRCUIT COURT OF ARLINGTON COUNTY

IN RE: EST	ATE OF	Fiduciary File - W			
	INFORMED C	<u>ONSENT</u>			
residuary	undersigned, being an adult resident of beneficiary under the Last Will here.	and Testa	ament o	r heir	at law of
	ve's compensation to				
compensati ("Guidelines of Falls Chu	on allowable a Personal Representative purs") approved by the judges of this 17th Judicial rch) and adhered to by the Commissioner of Personal Representatives and Administrat	suant to the G l Circuit Court of Accounts f	uidelines for of Virginia or the Circ	or Fiduciary a (Arlingtor cuit Court i	y Compensation n County & City
In particular,	I confirm my understanding of the following	ıg:			
1.	In the Account (copy attached) of the Personal Representative which has been submitted to the Commissioner of Accounts the sum of \$ has been disbursed as the Personal Representative's Fee ("Fee Taken").				
2.	Under the Court's Guidelines, the Personal Representative is entitled to Personal Representative Fees in the amount \$ ("Fee Allowable"). OR The Will sets forth particular compensation calculated as \$ ("Fee Allowable")				
3.	The Fee Taken of \$, exceeds the Fee Allowable , by the amount of \$ ("Excess Fee").				
4.	The Account will not be approved by the Commissioner of Accounts unless the undersigned consents to the payment of the Excess Fee (in the amount of \$). The undersigned understands that this Consent will be relied upon by the Commissioner of Accounts in approving the Account.				
5.	Absent this Consent, I, the undersigned, acknowledge that additional funds would have been distributed to me if the Personal Representative's Fee had been limited to the Fee Allowable.				
6.	This consent is given voluntarily. <u>I understand that I am not legally bound to consent to the Excess Fee.</u>				
Residuary Bo	eneficiary (signature)		Date		_
Residuary Bo	eneficiary (print)				