

STATE OF SOUTH CAROLINA)
)
COUNTY OF GREENVILLE)
)
IN THE MATTER OF:)
)
_____)
(Decedent))

IN THE PROBATE COURT

CASE NUMBER: _____

MOTION TO

- WITHDRAW AS ATTORNEY**
- SUBSTITUTE ATTORNEYS**
- REMOVE AN ATTORNEY**

Movant: _____

1. The undersigned request(s) that this Court order (*check the one that applies*)

- that he/she be permitted to withdraw as attorney for _____
- that _____ be substituted for him/her as attorney for _____
- that _____ be removed as attorney for _____

in the above-referenced matter.

2. Movant(s) make(s) this Motion (*check the one that applies*)

- with the consent of his/her client(s) as evidenced by his/her/their signature(s) on page 2
- with the consent of his/her client(s) and proposed succeeding counsel as evidenced by their signatures on page 2
- for the following reason(s) (*see Rule 1.16, Rules of Professional Conduct; attach extra pages, if needed*):

Executed this _____ day of _____, 20_____.

Signature: _____
Name: _____
Address: _____

Telephone: _____
Email: _____
Relationship to
Decedent/Estate: _____

Signature: _____
Name: _____
Address: _____

Telephone: _____
Email: _____
Relationship to
Decedent/Estate: _____

ORDER FOR HEARING

IT IS HEREBY ORDERED that a hearing on this matter be set for:

DATE: _____
TIME: _____
PLACE: 1200 Greenville County Square, 301 University Ridge, Greenville, SC 29601

Pursuant to SCPC 62-1-401, **THE MOVANT(S) IS/ARE ORDERED** to give notice of this hearing to all other interested persons by mailing or delivering his/her/their Notice of Hearing (FORM 326ES) and appropriate attachments to each of them at least twenty (20) days prior to the Hearing date. **PLEASE TAKE NOTICE** that a copy of this order is neither a substitute for the Notice of Hearing, nor one of the "appropriate attachments". **THE MOVANT(S) IS/ARE FURTHER ORDERED** to file his/her/their Proof of Delivery (FORM 120PC) of said Notice of Hearing no later than the hearing date.

Executed this _____ day of _____, 20_____.

Debora A. Faulkner, Probate Court Judge

ORDER

IT IS HEREBY ORDERED that this application be GRANTED DENIED and

- that he/she is permitted to withdraw as attorney for _____
- that _____ be substituted for _____ as attorney for _____
- that _____ be removed as attorney for _____
- that _____ shall continue representation as attorney for _____

in the above-referenced matter. Written notice of change of attorney, if granted, must be served as provided by Rule 5, SCRCP. If representation is terminated, the attorney shall take steps to the extent reasonably practicable to protect his/her client's interests.

Executed this _____ day of _____, 20_____.

- _____
Debora A. Faulkner, Probate Court Judge
- _____
Caroline M. Horlbeck, Associate Probate Court Judge
- _____
Clayton L. Jennings, Associate Probate Court Judge
- _____
Sandra J. Street, Deputy Probate Court Judge

I/WE CONSENT:

Signature: _____
Name: _____
Address: _____

Telephone: _____
Email: _____

Signature: _____
Name: _____
Address: _____

Telephone: _____
Email: _____