RECEIVED:

Instructions:	1) 2) 3) 4)	Complete this form to request exclusion from eFiling requirements. Send the exclusion request to the Office of the Probate Court Administrator, 186 Newington Road, West Hartford, CT o6110. For more information, see Probate Court Rules of Procedure, section 22.1(c). Type or print in ink. Use an additional sheet, or PC-180, if more space is needed.		
Attorney (Nam	ne ar	nd address)	Juris Number	
Email address	5		Telephone Number	

Reason for Exclusion Request

I request an exclusion from eFiling requirements for the following reasons:

Signature of Attorney			
Type or Print Name			
Date			
Do not write below this line			
The request is hereby:	Grant	ed Denied	
Signed		Name/Title of Person Signing	Date