

**EXECUTOR'S MOTION FOR APPOINTMENT OF TRUSTEE TO MANAGE
CLOSING OF LAW PRACTICE, WHEN ADVANCED PROVISIONS HAVE BEEN
MADE TO APPOINT TRUSTEE**

THE FOLLOWING MOTION PRESUMES SEPARATE COUNSEL FOR
IOLTA/TRUST ACCOUNTS

COMMONWEALTH OF KENTUCKY
___ **JUDICIAL CIRCUIT**
___ **DISTRICT COURT PROBATE DIVISION**
ACTION NO: _____

IN RE: THE ESTATE OF _____

MOTION TO APPOINT TRUSTEE/CO-TRUSTEE OF _____'S LAW PRACTICE

Comes now _____, Executor [*or Administrator*], of the Estate of _____, and moves the Court for an Order appointing a member or members of the ___ Kentucky Bar Association to serve as Trustee/Co-Trustee(s) of the law practice of _____, namely _____ Law Office, due to his/her death. In support of said motion, Executor [*or Administrator*] states as follows:

1. According to the records of the Kentucky Bar Association, decedent, _____ was licensed to practice law on _____.
2. At the time of his/her death, _____ practiced law in ___ County, Kentucky, and was the owner [*sole and managing member*] of the _____ Law Office, with a principal business address of _____.
3. On information and belief, at the time of his/her death, the decedent has no law partners or associates capable of winding down his/her law practice and insuring that the interests of his/her clients, and former clients, are protected.
4. On information and belief, there remain funds belonging to clients or third parties on deposit in trust or fiduciary accounts held solely in the name of the decedent, _____, and/or in the name of his/her law office.
5. [*Assisting Attorney1 Name here*], an attorney licensed to practice in the Commonwealth of Kentucky, and a member in good standing of the Kentucky Bar Association, Bar Id.

Number: _____, has consented to serve as Trustee/Co-Trustee of the Kentucky law practice of decedent, _____, namely the _____ Law Office for purposes of protecting the interest of the decedent's clients and former clients and assisting in winding down decedent's law practice, including but not limited to reviewing files, completing unfinished work, notifying clients and former clients of decedent's death, assisting clients in finding other attorneys, providing access to and returning files to clients and former clients. See Sworn Affidavit attached hereto as **EXHIBIT A**.

6. *[Assisting Attorney2 Name here]*, an attorney licensed to practice in the Commonwealth of Kentucky, and a member in good standing of the Kentucky Bar Association, Bar Id. Number: _____, has consented to serve as Trustee/Co-Trustee of the Kentucky law practice of decedent, _____, namely the _____ Law Office for purposes of provide trust accounting and to issuing unused trust balances owing to decedent's clients, as part of winding down decedent's law practice. See Sworn Affidavit attached hereto as **EXHIBIT B**.

WHEREFORE, _____, Executor *[or Administrator]* prays of this Court entry of an order as follows:

1. Appointing _____, to serve as Trustee/Co-Trustee of the law practice of decedent, _____, namely _____ Law Office, and authorizing Trustee/Co-Trustee to gain possession of decedent's law office files, to secure decedent's law office accounts, with the exclusion of law office IOLTA account, to gain possession of decedent's fiduciary account record, including all bank statements and cancelled checks, all deposit slips, all check stubs and all client ledger accounts and to take such action as are necessary to protect the interests of the clients and/or former clients of decedent, _____;
2. Directing and Ordering all accounting and financial institutions holding commercial accounts and accounting records belonging to decedent, _____, and/or _____ Law Office, to provide Trustee/Co-Trustee, _____, with copies of ledgers and accounts, with the exclusion of law office IOLTA account, including but not limited to all bank statements and cancelled checks, all deposit slips and all check stubs;
3. Appointing _____, to serve as Trustee/Co-Trustee of the law practice of decedent, _____, namely _____ Law Office, and authorizing Trustee/Co-Trustee to gain access to decedent's law office accounts and accounting records pertaining to law office IOLTA/TRUST accounts, including all bank statements and cancelled checks, all deposit slips, all check stubs and all client ledger accounts and to take such action as are necessary to protect the interests of the clients and/or former clients of decedent, _____ with regard to IOLTA/TRUST accounts;

4. Directing and Ordering all accounting and financial institutions holding commercial IOLTA/TRUST accounts and IOLTA/TRUST accounting records belonging to decedent, _____, and/or _____ Law Office, to provide Co-Trustee, _____, with copies of ledgers and accounts pertaining to IOLTA/TRUST accounts, including but not limited to all bank statements and cancelled checks, all deposit slips and all check stubs;

5. For such other and future relief as Court deems appropriate.

Respectfully Submitted,

COMMONWEALTH OF KENTUCKY ___ JUDICIAL CIRCUIT
___ DISTRICT COURT
PROBATE DIVISION
ACTION NO: _____

IN RE: THE ESTATE OF _____

SWORN AFFIDAVIT OF ATTORNEY

Comes now, _____, after being duly sworn, and states and avers as follows:

1. My name is _____, and I am an attorney licensed to practice in the Commonwealth of Kentucky.

2. I am a member of the Kentucky Bar Association, in good standing, with a Bar Identification Number of _____.

3. My principal office address is _____, _____ County, Kentucky.

4. I consent and agree to serve as Trustee/Co-Trustee for the _____ Law Office, belonging to the deceased, _____, and to the Estate of _____, for the purpose of assisting in winding down decedent's law practice, including but not limited to reviewing files, completing unfinished work, notifying clients and former clients of decedent's death, assisting clients in finding other attorneys, providing access to and returning files to clients and former clients.

Further the Affiant sayeth naught.

Name of Assisting Attorney1

COMMONWEALTH OF KENTUCKY
COUNTY OF _____

Subscribed and sworn to before me by _____, on this the ____ day of _____, 20____.

NOTARY PUBLIC

My Commission Expires On: _____

COMMONWEALTH OF KENTUCKY
____ JUDICIAL CIRCUIT
____ DISTRICT COURT
PROBATE DIVISION
ACTION NO: _____

IN RE: THE ESTATE OF _____

SWORN AFFIDAVIT OF ATTORNEY

Comes now, _____, after being duly sworn, and state and avers as follows:

1. My name is _____, and I am an attorney licensed to practice in the Commonwealth of Kentucky.
2. I am a member of the Kentucky Bar Association, in good standing, with a Bar Identification Number of _____.
3. My principal office address is _____, _____ County, Kentucky.
4. I consent and agree to serve as Trustee/Co-Trustee for the _____ Law Office, belonging to the deceased, _____, and to the Estate of _____, for the purpose of assisting in providing trust accounting and issuing unused trust balances owing to decedent's clients, as part of winding down decedent's law practice.

Further the Affiant sayeth naught.

Name of Assisting Attorney2

COMMONWEALTH OF KENTUCKY
COUNTY OF _____

Subscribed and sworn to before me by _____, on this the _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires On: _____