

# Beneficiary Objection to Will

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Recipient's Name]

[Recipient's Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I am writing to formally object to the will of [Deceased's Name], dated [Date of Will], due to concerns regarding [his/her/their] lack of mental capacity at the time of its creation.

As a [relationship to the deceased], I believe it is important to bring to your attention the circumstances surrounding [Deceased's Name]'s condition when the will was drafted. There is substantial evidence that [he/she/they] was unable to understand the nature and consequences of [his/her/their] actions, which raises serious questions about the validity of this document.

I respectfully request that the matter be reviewed carefully, and I am prepared to provide any necessary documentation and testimonies to support this claim.

Thank you for your attention to this important issue.

Sincerely,

[Your Name]