

STATE OF ILLINOIS UNITED STATES OF AMERICA COUNTY OF DU PAGE
IN THE CIRCUIT COURT OF THE EIGHTEENTH JUDICIAL CIRCUIT

IN RE THE ESTATE OF

CASE NUMBER

DECEASED

File Stamp Here

PETITION FOR PROBATE OF WILL AND FOR LETTERS TESTAMENTARY

Executor * Independent Supervised Administrator with the Will Annexed

The undersigned, on oath states:

1. The decedent, whose place of residence at the time of death was

died on, at leaving a Will.

2. The approximate value of the estate in this state is:

Personal \$ Real \$ Annual Income From Real Estate \$

3. The name and addresses of the testator's heirs and legatees are (list heirs first): list on additional sheet

Name Relationship Heir - H Minor - M Address Legatee - L Disabled - D (If unknown, so state)

4. The testator nominated the following to act in the office indicated above:

Name Address

5. Petitioner, as indicated above, is legally qualified to act, or nominate a resident of Illinois to act. Petitioner asks that letters testamentary be issued.

6. * If so indicated above, the Petitioner requests independent administration. The name and address of the personal fiduciary designated to act during independent administration for each heir who is a minor or disabled person are shown on Exhibit A attached and made part of this petition.

Name: Pro Se

Petitioner Signature

DuPage Attorney Number:

Attorney for:

Address, City, State, Zip

Address:

Signed and sworn to before me

City/State/Zip:

Telephone Number:

Date

Email:

If a consul or consular agent is to be notified, name Country

Circuit Clerk or Notary Public