

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

APPEARANCE FOR LETTERS OF ADMINISTRATION

We, heirs of _____ deceased
of legal age and under no legal disability, appear, waive notice and consent to the immediate appointment of

_____ as administrator* _____ and to the issuance of letters of office

Date: _____

**

Name: _____ PRO SE

DuPage Attorney Number: _____

Attorney for: _____

Address: _____

City/State/Zip: _____

Telephone: _____

* If appropriate, insert "with the will annexed", "De bonis Non", or "De bonis Non with the will annexed."

**Type or print full name under signature