Approved, SCAO PCS CODE: TES TCS CODE: TEST

STATE OF MICHIGAN PROBATE COURT COUNTY OF

## TESTIMONY TO IDENTIFY HEIRS

FILE NO.

OUNTY OF	IDENTIFY HEIRS			
Estate of				
		. My address is		
2. I am related to the decedent (or kr	now his/her family) as follows:			
3. The date and time of the death of	of the decedent is	and at that time the		
decedent's domicile (residence)	wasAddress			
	ONS, TREAT ALL PERSONS WHO DIED WITHIN DECEDENT. List persons who died within 120 l			
	a surviving spouse. left a surviving spous wing children, both natural (born in or out of v	se named		
o. a. The decedent had the lone	wing children, both natural (both in or out or v	vediook) and adopted.		
b. Of the children listed in 5.a.	the following are no longer heirs due to their a	doption by someone other than a stepparent:		
c. Of the children listed in 5.a,	the following were not children of the surviving	spouse:		
Answer question 6 only if question				
6. a. The following children listed	d in 5.a. died before the decedent:			
h Obildeen lieted in C. a. left H				
own predeceased children	heir own children (either natural or adopted) o who survived the decedent. The names of the			
6.a. to whom they are rela	ted are as follows.			
c. Of the persons listed in 6 h	, the following are no longer heirs due to their a	adoption by someone other than a stepparent:		
	, and removing and the temper memorates to anomic	acopaion by compone care, and a coppersia.		
If decedent left no surviving descen	dant, complete 7			
		surviving father and/or mother named		

(SEE SECOND PAGE)

Do not write below this line - For court use only

If decedent is not survived by spouse, descendants, or p  8. The decedent did not leave surviving brothers or adopted, whole blood or half blood, who were not	s or sisters. left the f	ollowing brothers or sis	
9. One or more of the brothers and sisters of the decadopted, who were not adopted by others and who name(s) of their deceased ancestor are			
If decedent was not survived by spouse, descendants, pa 10 (and 11, if applicable).  10. The decedent did not leave surviving grandpare		dren of deceased brother	-
10. The decedent did not leave surviving grandpare	nts. lett surviving grandp	arenis (boti matemara	na patemai) named
11. Both maternal grandparents and/or both paternal and their relationships to the grandparents are	al grandparents died before	decedent. Their surviv	ng descendants
Maternal grandparents:			
Paternal grandparents:			
12. The following heirs listed above are under legal name(s) of their representative(s) are			egal disability, and
The following deceased heirs survived the deceased who represent decedent's interests are			ne name(s) of those
14. The following persons identified above did not s decedent, and the date and time of their deaths	-	hours. Their names, re	lationships to
NAME	RELATION	DATE OF DEATH	TIME OF DEATH
15. The decedent left a will. All devisees are heir		es named in the will or plemental testimony form is o	
	Signature		
Subscribed and sworn to before me on	,		_ County, Michigan.
My commission expires: Sign	nature:	otary public	Bar no
Notary public, State of Michigan, County of	, y .g	<u> </u>	
Attorney signature	Address		
Name (type or print) Bar	rno. City, state, zip		Telephone no.