

IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS COUNTY DEPARTMENT - PROBATE DIVISION

Case No. \_\_\_\_\_ Calendar \_\_\_\_\_

Estate of \_\_\_\_\_

Deceased

**PROOF OF MAILING AND PUBLICATION**

The undersigned states under the penalties of perjury:

- 1. On \_\_\_\_\_, the following required **NOTICES\*** were mailed to each person **whose name and address are stated on the second page**:

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Copies of each **NOTICE** and the required documents, as mailed, are in the possession of the attorney.

- 2. The following required **NOTICES\*** have been published:

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The publisher's certificate for each **NOTICE** is attached hereto or is on file with the clerk of the court.

\_\_\_\_\_  
[signature of the representative or the attorney]

\_\_\_\_\_  
[date]

\_\_\_\_\_  
Attorney Certification if signed by the representative (Sup. Ct. Rule 137)

**\* Fill in the blank lines in paragraphs 1 and 2 with the appropriate notices under the Probate Act. The more frequently used forms are listed on the second page.**

<b>MAILED NOTICES</b>		
<b>Probate Act §</b>		<b>Description of Notice</b>
Form # 1020	6-10	Notice to heirs and legatees - Will admitted
Form # 1003 A-B	28-2	Notice to heirs and legatees of rights in independent administration
Form # 1004	9-5 and 6-2	Notice to heirs of hearing on petition for letters of administration (or letters of administration with Will annexed)
Form # 1007	28-4(a)(2)	Notice of termination of independent administration
Form # 1008	28-11(e)	Notice of final report - independent administration

<b>PUBLISHED NOTICES</b>		
<b>Probate Act §</b>		<b>Description of Notice</b>
(A)	18-3	Claims notice
(B)	6-10 and 18-3	Notice to unknown heirs and legatees of admission of Will, and claims notice
(C)	9-5 and 18-3	Grant of independent administration in intestacy and claims notice
(D)	28-11(e)	Final report filed — independent administration
(E)	9-8(g)	Summary administration notice

**Name****Address****City/State/Zip**

Attorney Number \_\_\_\_\_

Name \_\_\_\_\_

Firm Name \_\_\_\_\_

Attorneys for \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Telephone \_\_\_\_\_

Email \_\_\_\_\_