

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

Case No. _____ Calendar _____

Estate of _____
Deceased

**RECEIPT AND APPROVAL ON CLOSING OF
DECEDENT'S ESTATE IN INDEPENDENT ADMINISTRATION***

I, _____,
[printed name of the distributee]

acknowledge that I have received my distributive share of the estate in full. I have also received copies of the representative's **INVENTORY, ACCOUNT and FINAL REPORT.**

I approve the representative's **ACCOUNT** and consent to the fees of the representative in the amount of \$ _____ and the fees of the attorney for the representative in the amount of \$ _____ as set forth in the account.

Dated: _____
[signature of the distributee]

[address]

[city/state/zip]

*** To be signed by each heir in an intestate estate and each residuary legatee in a testate estate**

Attorney Number _____

Name _____

Firm Name _____

Attorneys for the representative

Address _____

City/State/Zip _____

Telephone _____

Email _____