PCS Code: TES TCS Code: TEST

STATE OF MICHIGAN

CASE NO. and JUDGE

PROBATE COUNTY COUNTY	TESTIMONY TO IDENTIFY HEIRS	
Court address		Court telephone no.
In the matter of ${\text{First, middle, and last name}}$	of decedent	
	. My addr	
2. I am related to the decedent (or kn	ow his/her family) as follows:	
	ne decedent is	
decedent's domicile (residence) wa	Address	
	S, TREAT ALL PERSONS WHO DIED WITHIN 12 ECEDENT. List persons who died within 120 ho	
4. The decedent ☐ did not leave a ☐ left a surviving		
	ng children, both natural (born in or out of we	dlock) and adopted:
	ne following are no longer heirs due to their ac	doption by someone other than a
	ne following were not children of the surviving	spouse:
Answer question 6 only if question 5a 6. ☐ a. The following children listed i	was checked. n 5a died before the decedent:	
	own children (either natural or adopted) or let en who survived the decedent. The names of are related are as follows:	
•	ne following are no longer heirs due to their ac	doption by someone other than a
• •		

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If decedent left no surviving descendant, complete 7. 7. The decedent	☐ left a surviving parent named
	ents, complete 8 (and 9, if applicable). r sisters.
	dent died before him/her leaving descendants, either natural or survived the decedent. The names of these descendants, and
complete10 (and 11, if applicable).	nt, brother, or sister or children of deceased brother or sister,
named	ts. \square left surviving grandparents (both maternal and paternal
☐ 11. Both maternal grandparents and/or both paternal g and their relationships to the grandparents are	randparents died before decedent. Their surviving descendants
Maternal grandparents:	
Paternal grandparents:	
☐ 12. The following heirs listed above are under legal disa	ability and are currently living. Their name(s), legal disability, and
name(s) of their representative(s) are	
	nt by more than 120 hours. Their name(s) and the name(s) of
☐ 14. The following persons identified above did not surv	ive the decedent by 120 hours. Their names, relationships to
decedent, and the date and time of their deaths are	

RELATION

NAME

DATE OF DEATH

TIME OF DEATH

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\square 15. The decedent left a will.	☐ All devisees are heirs. ☐ Some of the devisees na (A supplemental testimony form	amed in the will or codicil are not heirs of the testator. n is completed and attached.)
I declare under the penalties of posts of my information, knowledge		been examined by me and that its contents are true to the
Date	S	ignature
Attorney signature		
Name (type or print)	Bar no.	
Address		
City, state, zip	Telephone no.	