



**In The Circuit Court  
For The Seventh Judicial Circuit of Illinois  
Sangamon County, Springfield, Illinois**

IN THE MATTER OF:

\_\_\_\_\_  
(Deceased)



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

**APPEARANCE ON PETITION FOR PROBATE OF WILL  
AND FOR LETTERS AND WAIVER OF NOTICE**

I, the undersigned Heir or Legatee of the above named Decedent, \_\_\_\_\_ being of legal age and under no legal disability, appear, waive Notice, and consent to an immediate hearing on the Petition to Admit said Will by any evidence competent to establish a Will including proof of such Will by statements of attesting witnesses made by testimony before the Court, or an Attestation Clause signed by the witness and forming a part of or attached to the Will or by an Affidavit which is signed by the witness at or after the time of attestation and which forms part of the Will or is attached to the Will or to an accurate facsimile of the Will; and consent to issuance to Letters of Office; and pursuant to Section 6-10(b) of the Probate Act of 1975 as amended, I further waive my right to receive a copy of the Petition to Admit Will or Issue Letters and a copy of the Order, and I waive my right to receive Notice and Explanation of the Right of Heirs and Legatees when the Will is Admitted to Probate pursuant to Section 6-10 of the Probate Act and Supreme Court Rule 108, including my right to Notice that I may file within forty-two (42) days after the effective date of the original Order of Admission, a Petition to require proof of Will by testimony of witnesses to the Will in open Court or other evidence as provided in Section 6-21 of the Probate Act of 1975 as amended, and also including my right to Notice that under Section 8-1 of the Probate Act of 1975 as amended that I may contest the validity of the Will by filing a Petition with the Court within six (6) months after admission of the Will to Probate.

\_\_\_\_\_  
Date  
\_\_\_\_\_  
Type name  
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date  
\_\_\_\_\_  
Type name  
\_\_\_\_\_  
Signature

Name: \_\_\_\_\_  
Attorney For: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Area Code/Telephone: \_\_\_\_\_

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