



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

IN THE ESTATE OF:

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



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

**PETITION FOR LETTERS OF ADMINISTRATION**

\_\_\_\_\_, on oath states:  
(Name)

1. \_\_\_\_\_, a resident of \_\_\_\_\_ in the County  
of \_\_\_\_\_ (Name) and State of \_\_\_\_\_, died on the \_\_\_\_ Day of \_\_\_\_\_,  
20\_\_\_\_ leaving no Will.

2. The approximate value of the Estate in this State is:

Personal: \$ \_\_\_\_\_ Real: \$ \_\_\_\_\_

Annual Income from Real Estate: \$ \_\_\_\_\_

3. The following are the names and Street Addresses of all of the heirs and of all persons entitled to preference over, or equally entitled with, Petitioner to nominate an administrator:

<u>Name</u>	<u>Relationship</u>	<u>Right to Nominate: Preference-P Equally-E</u>	<u>Minor-M Disabled-D</u>	<u>Street Address</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

4. Your Petitioner, whose Street Address is \_\_\_\_\_,  
is a resident of the State of \_\_\_\_\_, is a \_\_\_\_\_ of said Decedent,  
(Relationship to Decedent)  
and is legally qualified to Petition for Letters or to nominate an administrator.

5. Independent Administration under Article XXVIII (is) (is not) requested. If Independent Administration is requested, the following are the names and addresses of all personal fiduciaries acting or designated to act pursuant to Section 28-3 of the Probate Act:

Name

Address

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Petitioner prays that Letters of Administration issue to:

Name

Address

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

qualified and willing to act.

\_\_\_\_\_  
Petitioner

\_\_\_\_\_  
Petitioner

\_\_\_\_\_  
Petitioner's Address

\_\_\_\_\_  
Petitioner's Address

Hearing is set for the \_\_\_\_ Day of \_\_\_\_\_  
20 \_\_\_\_, at \_\_\_\_\_ a.m., at  
\_\_\_\_\_.

SUBSCRIBED AND SWORN to before me  
in the County of \_\_\_\_\_  
and the State of \_\_\_\_\_

If a Consul or Consular Agent is to be notified,  
state name of Country here:

\_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Notary Public

Name: \_\_\_\_\_

Attorney for: \_\_\_\_\_

Address: \_\_\_\_\_

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

Area Code/Telephone: \_\_\_\_\_