

STATE OF MINNESOTA

COUNTY OF _____

JUDICIAL DISTRICT
DISTRICT COURT
PROBATE DIVISION

Court File No. _____

Estate of _____,

Decedent

**NOTICE AND ORDER OF HEARING ON
PETITION FOR PROBATE OF WILL,
DETERMINATION OF PARTIAL
TESTACY, DETERMINATION OF
HEIRS, AND APPOINTMENT OF
PERSONAL REPRESENTATIVE**

It is Ordered and Notice is given that on _____, at _____ (a.m.) (p.m.), a hearing will be held in this Court at _____, Minnesota, for the formal probate of an instrument purporting to be the Will of the Decedent, dated _____, and codicil() to the Will dated _____, and separate writing() under Minnesota Statutes section 524.2-513 ("Will"), which was previously probated informally and for the appointment of _____, whose address is _____

_____ as Personal Representative of the Estate of the Decedent in ☐ an UNSUPERVISED ☐ a SUPERVISED administration. In addition, the petition seeks formal determination that the Decedent died partially testate, and requests determination of Decedent's heirs. Any objections to the petition must be filed with the Court prior to or raised at the hearing. If proper and if no objections are filed or raised, the Personal Representative will be appointed with full power to administer the Estate including the power to collect all assets, to pay all legal debts, claims, taxes and expenses, to sell real and personal property, and to do all necessary acts for the Estate.

Notice is also given that (subject to Minnesota Statutes section 524.3-801) all creditors having claims against the Estate are required to present the claims to the Personal Representative or to the Court Administrator within four months after the date of this Notice or the claims will be barred.

A charitable beneficiary may request notice of the probate proceedings be given to the Attorney General pursuant to Minnesota Statutes section 501B.41, subdivision 5.

BY THE COURT

Dated: _____

Judge of District Court

Dated: _____

Court Administrator

| | |
|--------------------------------------|-------|
| Attorney for Personal Representative | |
| Name | _____ |
| Firm | _____ |
| Street | _____ |
| City, State, ZIP | _____ |
| Attorney License No. | _____ |
| Telephone: | _____ |
| FAX: | _____ |
| Email: | _____ |

NOTE: If note to creditors has been previously given, delete the notice to creditors.

SAMPLE DOCUMENT