

STATE OF MINNESOTA

COUNTY OF \_\_\_\_\_

JUDICIAL DISTRICT  
DISTRICT COURT  
PROBATE DIVISION

Court File No. \_\_\_\_\_

Estate of

\_\_\_\_\_,  
Decedent

**PETITION FOR FAMILY MAINTENANCE**

I, \_\_\_\_\_, state: \_\_\_\_\_

1. My address is: \_\_\_\_\_.

2. I am an interested person as defined by Minnesota law because I am: \_\_\_\_\_.

3. The Decedent was survived by a spouse, \_\_\_\_\_, and the following minor or dependent children whose names and ages are: \_\_\_\_\_.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

4. Decedent's Estate is  solvent  insolvent.

5. A reasonable and necessary family maintenance of \$ \_\_\_\_\_ should be paid to and for the use and benefit of Decedent's surviving spouse and minor or dependent children constituting the family of Decedent.

**WHEREFORE**, I request the Court:

1. Fix a time and place for a hearing on this Petition;
2. Enter an Order directing the payment of a family maintenance in the amount of \$ \_\_\_\_\_ per month commencing on \_\_\_\_\_; and
3. Grant such other relief as may be proper.

Under penalties for perjury, I declare or affirm that I have read this document and I know or believe its representations are true and complete.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Petitioner

Attorney for Petitioner
Name _____
Firm _____
Street _____
City, State, ZIP _____
Attorney License No: _____
Telephone: _____
FAX: _____
Email: _____

**SAMPLE DOCUMENT**