



Calhoun County Probate Court
Calhoun County, Michigan

Michael L. Jaconette
Chief Probate Judge

Calhoun County Justice Center
161 E. Michigan Ave.
Battle Creek, MI 49014-4066
269-969-6794
Fax (269) 969-6797

Kristen L. Getting
Court Administrator

Cindy K. Rude
Probate Manager/Register

FORMS & INFORMATION
DATES OF DEATH AFTER 02/21/2024
ESTATES UNDER \$50,000

Forms filed in the County of Residence of the Decedent (from death certificate):

- 1) Petition and Order for Assignment (PC 556)
- 2) Testimony to Identify Heirs (PC 565)
- 3) Protected Personal Identifying Information (**MC 97**) **for the decedent**
- 4) Death Certificate
- 5) Copy of receipt bill/receipt, showing all charges and who paid what amounts
- 6) Other forms may be required, depending on circumstances

Filing Fee:

\$25 filing fee + \$13 for certified copy + inventory fee to be determined by value of assets

Priority for Payment:

- 1) Funeral home, if any balance owing on funeral bill/receipt
- 2) Reimbursement for payment of funeral expenses (as shown on funeral bill/receipt)
- 3) Surviving spouse
- 4) Other heirs

Recommendation Regarding Attorney:

An attorney should be consulted and retained to handle probate proceedings, especially if there is real estate involved. Estates are almost always complicated enough to justify such professional services.

Filing Fee \$25 + Certified Copy Fee \$13 + Inventory Fee to be determined

JIS Code: PER, OAA

STATE OF MICHIGAN PROBATE COURT COUNTY	PETITION AND ORDER FOR ASSIGNMENT	CASE NUMBER and JUDGE
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Court address _____ Court telephone number _____

In the matter of _____ Put last 4 digits of SSN
First, middle, and last name of decedent **XXX-XX-** in box 2 on MC 97.
Last four digits of SSN

Petitioner's name, address, and telephone number

Petitioner's attorney, bar number, address, and telephone number

Note: You may only use this form if the value of the decedent's gross estate does not/will not exceed \$50,000 as adjusted annually for the cost of living. The value of the decedent's gross estate is calculated by adding the value of the decedent's personal property to the value of the decedent's real property and subtracting any unpaid funeral or burial expenses. When calculating the value of the decedent's gross estate to determine whether this form may be used, if there is real property included in the estate, you must deduct any lien amount (not to exceed \$250,000 as adjusted annually for the cost of living) from the value of the real property.

PETITION

I, _____, represent that:
Name and relationship

1. Decedent died on _____ .
Date

2. Decedent was a resident of _____ in this county.
City/Township

Decedent lived outside of Michigan and left an estate within this county to be administered.

3. The decedent's personal and real property, gross values, and lien amounts (if any) are listed below. The values of all property are calculated as of the decedent's date of death.

Note: Do not provide financial account numbers on this form. If an account number is necessary to distinguish between accounts, put it on form MC 97.

Legal description of real property	Gross value	Lien amount	Inventory value (less lien)*
Legal description of real property	Gross value	Lien amount	Inventory value (less lien)*
Description of personal property	Gross value		Inventory value*
Description of personal property	Gross value		Inventory value*
Description of personal property	Gross value		Inventory value*
Description of personal property	Gross value		Inventory value*
Totals	Total Gross Value		Total Inventory Value

* For **real property** only, if the date of death is on or after March 28, 2013, the gross value of a parcel must be reduced by any lien amount on that parcel; however, the remaining inventory value of that parcel cannot be less than zero. Do not subtract any liens when entering the gross value of a parcel in the list above. For **personal property**, the gross value and inventory value are the same. (Attach a separate sheet if necessary.)

4. Funeral and burial expenses are \$ _____ .
The following persons have paid the following amounts toward the funeral and burial expenses:
(Statements and receipts are attached.)

NAME	AMOUNT	NAME	AMOUNT

The amount of funeral and burial expenses remaining unpaid is \$ _____ .
The gross value of the decedent's property remaining after payment of funeral and burial expenses does not/will not exceed \$50,000 as adjusted annually for cost of living.

5. The name and address of the surviving spouse or, if there is not a spouse, the name, age, relationship, and address of each of the decedent's heirs are as follows:

NAME	AGE	RELATIONSHIP	ADDRESS		
			Street address		
			City	State	Zip
			Street address		
			City	State	Zip
			Street address		
			City	State	Zip
			Street address		
			City	State	Zip

6. I REQUEST that the property listed above be assigned as follows:

- a. for funeral and burial expenses, \$ _____ to _____ ,
Name
\$ _____ to _____ , and \$ _____
Name
to _____ .
Name
- b. to the surviving spouse, _____ .
- c. to the following heirs in the stated proportions, _____
_____ .

I declare under the penalties of perjury that this petition has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

_____ Date

_____ Petitioner signature

_____ Date

_____ Attorney signature

ORDER ASSIGNING ASSETS

In the matter of _____
First, middle, and last name of decedent

IT IS ORDERED:

7. The property described above is assigned as follows:

a. for funeral and burial expenses, \$ _____ to _____ ,
Name
\$ _____ to _____ , and \$ _____
Name
to _____ .
Name

b. to the surviving spouse, _____ .

c. to the following heirs in the stated proportions, _____

_____ .

For 63 days from the date of this order, the share of each heir other than a surviving spouse or minor child shall be subject to any unsatisfied debt of the decedent up to the value of property received through this order.

8. The petition is denied. dismissed/withdrawn.

Judge signature and date

I certify that I have compared this copy with the original on file and that it is a correct copy of the original.

Deputy register signature and date

STATE OF MICHIGAN PROBATE COURT COUNTY	TESTIMONY TO IDENTIFY HEIRS	CASE NO. and JUDGE
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Court address _____ Court telephone no. _____

In the matter of _____
First, middle, and last name of decedent

1. My name is _____ . My address is _____

2. I am related to the decedent (or know his/her family) as follows: _____

3. The date and time of the death of the decedent is _____ and at that time the
decedent's domicile (residence) was _____
Date Time Address

NOTE: IN THE FOLLOWING QUESTIONS, TREAT ALL PERSONS WHO DIED WITHIN 120 HOURS AFTER THE DECEDENT AS IF THEY DID NOT SURVIVE THE DECEDENT. List persons who died within 120 hours after the decedent in item 14 below.

4. The decedent did not leave a surviving spouse.
 left a surviving spouse named _____

5. a. The decedent had the following children, both natural (born in or out of wedlock) and adopted:

 b. Of the children listed in 5a, the following are no longer heirs due to their adoption by someone other than a stepparent: _____
 c. Of the children listed in 5a, the following were not children of the surviving spouse: _____

Answer question 6 only if question 5a was checked.

6. a. The following children listed in 5a died before the decedent: _____

 b. Children listed in 6a left their own children (either natural or adopted) or left grandchildren from one or more of their own predeceased children who survived the decedent. The names of these descendants and the name of the child in 6a to whom they are related are as follows:

 c. Of the persons listed in 6b, the following are no longer heirs due to their adoption by someone other than a stepparent: _____

If decedent left no surviving descendant, complete 7.

7. The decedent did not leave a surviving parent. left a surviving parent named _____

If decedent is not survived by spouse, descendants, or parents, complete 8 (and 9, if applicable).

8. The decedent did not leave surviving brothers or sisters. left the following brothers or sisters, either natural or adopted, whole blood or half blood, who were not adopted by others and who survived the decedent:

9. One or more of the brothers and sisters of the decedent died before him/her leaving descendants, either natural or adopted, who were not adopted by others and who survived the decedent. The names of these descendants, and the name(s) of their deceased ancestor are _____

If decedent was not survived by spouse, descendants, parent, brother, or sister or children of deceased brother or sister, complete 10 (and 11, if applicable).

10. The decedent did not leave surviving grandparents. left surviving grandparents (both maternal and paternal) named _____

11. Both maternal grandparents and/or both paternal grandparents died before decedent. Their surviving descendants and their relationships to the grandparents are

Maternal grandparents: _____

Paternal grandparents: _____

12. The following heirs listed above are under legal disability and are currently living. Their name(s), legal disability, and name(s) of their representative(s) are _____

13. The following deceased heirs survived the decedent by more than 120 hours. Their name(s) and the name(s) of those who represent decedent's interests are _____

14. The following persons identified above did not survive the decedent by 120 hours. Their names, relationships to decedent, and the date and time of their deaths are:

NAME	RELATION	DATE OF DEATH	TIME OF DEATH

15. The decedent left a will. All devisees are heirs.
 Some of the devisees named in the will or codicil are not heirs of the testator.
(A supplemental testimony form is completed and attached.)

I declare under the penalties of perjury that this testimony has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

Date

Signature

Attorney signature

Name (type or print) Bar no.

Address

City, state, zip Telephone no.

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT COUNTY PROBATE	PROTECTED PERSONAL IDENTIFYING INFORMATION	CASE NO. and JUDGE
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Court address

Court telephone no.

Plaintiff's/Petitioner's name	v	Defendant's/Respondent's name
In the matter of _____		

If this form is filed on or after January 1, 2022, it will be maintained as a nonpublic document because the form contains personal identifying information (PII) that will be protected when amendments to MCR 1.109 become effective on January 1, 2022. Use this form to provide PII only for a person who is a defendant, respondent, or decedent. If the person is a plaintiff, petitioner, or other individual, use form MC 97a.

Instructions:

- Use this form when an SCAO-approved form instructs you to use it to provide PII.
- **Provide only** the PII required for your particular case. For example, if you are filing a document that requires you to provide a date of birth to the court, complete only that field on this form.

Name of form/document that this MC 97 is being filed with: _____

Printed name of individual completing form and date _____

Instructions: Provide the name of the person that the PII applies to, followed by the specific PII that is required to be provided. For Other, specify the type of PII in addition to the PII itself. Use the below reference number (Ref. No.) in the document being filed in place of the PII. For example, insert "Ref. No. 1" in place of the DOB in the document.

Ref. No.	Name (required)
1	Date of birth
2	National ID no. / Last 4 digits of SSN XXX-XX-_____
3	Driver's License / State-issued ID no.
4	Passport no.
5	Other

Ref. No.	Instructions: List the name of the financial institution and the account number. List the paragraph that references the account, if needed for clarity. Use reference number (Ref. No.) when necessary to refer to account in documents being filed.		
6	Financial institution	Account no.	Paragraph no.
7	Financial institution	Account no.	Paragraph no.
8	Financial institution	Account no.	Paragraph no.
9	Financial institution	Account no.	Paragraph no.