Executor / Executrix Form

<u>CIRCLE ONE</u> Executor / Executrix

EXECUTOR / EXECUTRIX NOTICE

Estate of	NAME	, deceased,
late of	FULL ADDRESS	
-		granted to the undersigned, all persons ent, and those having claims to present
EXECUTOR(RIX) NAME		
ADDRESS CITY / STATE / ZIP		, Executrix(or),
or to his/her/their Attorney:		
ATTORNEY NAME ADDRESS		
CITY/ STATE/ ZIP		
		Your Phone Number (will not be published)