

<b>STATE OF MICHIGAN PROBATE COURT COUNTY OF _____</b>	<b>SAFE DEPOSIT BOX CERTIFICATE AND RECEIPT</b>	<b>FILE NO.</b> _____
--	---	-----------------------

Estate of \_\_\_\_\_

**CERTIFICATE**

1. The undersigned certify that they were present on this date at the opening of the safe deposit box number \_\_\_\_\_

located in \_\_\_\_\_,  
Name of bank, trust or safe deposit company

a. they  did  did not find a will of the decedent;

b. they  did  did not find a deed to a burial plot in which decedent is to be buried;

c. no item or items, other than such deed or will, were removed from the safe deposit box.

\_\_\_\_\_  
Date

Signatures of others present, if any:

\_\_\_\_\_  
Signature of person named in order to examine contents of box

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature of bank officer or authorized employee

\_\_\_\_\_  
Signature

**REGISTER'S RECEIPT**

2. I acknowledge receipt from \_\_\_\_\_  
Name of person given authority by court order to examine contents of box

of the following items:

a.  Will of the decedent

b.  Burial plot deed

\_\_\_\_\_  
Date

\_\_\_\_\_  
Deputy Probate Register

Do not write below this line - For court use only