

STATE OF MICHIGAN PROBATE COURT COUNTY OF	NOTICE TO KNOWN CREDITORS	FILE NO.
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Estate of _____

TO: _____
 Name _____

 Address _____

 City, state, zip _____

The fiduciary believes you may be a creditor of the estate. The attached notice to creditors was published _____ .
Date

You have four months from the above date of publication or one month from the date this notice is sent to you, whichever is later, to present your written claim or it will be forever barred. You may use the Statement and Proof of Claim (Form PC 579) to submit your claim. The written claim must be timely delivered or mailed to the fiduciary listed below. You may also send it to the probate court for filing along with a filing fee of \$20.00. You may also commence a suit against the estate in a court.

_____	_____	_____
Date	Name of fiduciary to whom claim should be presented	
_____	_____	_____
Attorney name (type or print)	Bar no.	Title
_____	_____	_____
Address	Address	
_____	_____	_____
City, state, zip	Telephone no.	City, state, zip

PROOF OF SERVICE

I certify that on _____, I served a copy of this notice on the creditor by
Date

- delivering personally to the creditor.
- mailing, with postage prepaid, to the address indicated in this notice.

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

_____	_____
Date	Signature

Do not write below this line - For court use only