

**IN THE CIRCUIT COURT OF THE SIXTEENTH JUDICIAL CIRCUIT  
KANE COUNTY, ILLINOIS**

Case No. \_\_\_\_\_

IN THE MATTER OF THE ESTATE OF:

Name: \_\_\_\_\_

File Stamp

**AFFIDAVIT OF ELIGIBILITY OF REPRESENTATIVE**

I, \_\_\_\_\_, under the penalties of perjury certify as follows:  
that I am eighteen (18) years of age or older, I am a resident of the United States, I am of sound mind, I am not  
adjudged to be a disabled person as defined in 755 ILCS 5/11a-2, and I have not been convicted of a felony.

- ☐ I am a resident of the State of Illinois.
- ☐ I am not a resident of the State of Illinois.

I designate \_\_\_\_\_  
as my resident agent. (Name, Address, City, State, Zip)

**Under penalties of perjury as provided by law pursuant to 735 ILCS 5/1-109, the undersigned certifies that the statements set forth in this instrument are true and correct, except as to matters stated to be on information and belief and as to such matters the undersigned certifies that he/she verily believes the same to be true.**

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

Telephone No.: \_\_\_\_\_

Attorney Signature/Certification  
pursuant to Supreme Court Rule 137: \_\_\_\_\_

Attorney/Pro Se: \_\_\_\_\_

Atty. Registration No.: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

Telephone No.: \_\_\_\_\_

Attorney E-mail: \_\_\_\_\_