

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

Case No. _____

IN THE MATTER OF THE ESTATE OF (DECEDENT):
(Decedent/Minor/Disabled Person)

Name: _____

Address: _____

City, State, Zip: _____

File Stamp

INVENTORY

First Inventory **Amended Inventory** **Supplemental Inventory**

The undersigned certifies that all information identified on the reverse side of this form is true and is a full, true and correct inventory of the real and personal estate of the above identified case so far as the same has come to my knowledge and of any cause of action on which there is a right to sue.

_____ Value of Personal Property

_____ Value of Real Property

_____ Amount of Bond Surety Surety waived

Bond not required

Under penalties as provided by law pursuant to 735 ILCS 5/1-109, the undersigned certifies that the statements set forth in this petition 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.

 Executor Administrator Guardian Other
(if officer of corporate fiduciary, state position)

Signed pursuant to Supreme Court Rule 137: _____ (Attorney or Party)

Attorney/Pro Se: _____

Address: _____

City, State, Zip: _____

Telephone No.: _____

Atty. Registration No.: _____

Attorney E-mail: _____

