## IN THE PROBATE COURT OF FORSYTH COUNTY STATE OF GEORGIA

	Dagagad	Estate Number:	Estate Number:		
	Deceased.	§53-5-8(b) Filing Certification			
	<u>O.G.d.n.</u>	33 5 0(b) 1 ming certification			
		, Personal Representative of the above-			
	provided notice as required i as follows:	n O.C.G.A. §53-5-8(b) to the beneficiaries n	amed in	the	
VIII a	15 10110W5.	_	4	_	
			Form of Notice Waiver Mail Searc		
	Name	Date	Main	Affida	
1.					
2.			П		
۷.					
3.					
4.					
5.					
	uctions:	vill and check the box for their form of notic	a (If tha	ro aro	
1.	more than 5 beneficiaries, a		e. (I) the	eure	
2.	Attach a copy of the waiver	they signed <u>or</u> the notice you mailed for eacl	h benefic	iary.	
		receipt showing certified, registered, or over	_	_	
4.		beneficiary is and cannot find them, search f	or them	and	
_	,, , ,	nt Search explaining your efforts.			
		in 60 days of your date of appointment. s, the court may cite you to appear and show	cauca w	hu	
-	<u>Jan to do each of these things</u> Letters Testamentary should i		<u>cuuse w</u>	<u>11 y</u>	
	This day of				
	<b>J</b>	, Signed:			
		Printed name:			
		i i iiittu iiaiiie.			

## IN THE PROBATE COURT OF FORSYTH COUNTY STATE OF GEORGIA

Estate of:	Estate Number:
Deceased.	25446 744115677
Notice to Beneficiary purs	euant to O.C.G.A. §53-5-8(b)
To Beneficiary:	
Name:	
Address:	
This is to serve as notice to the above- been appointed Personal Representative of that:	named beneficiary that the undersigned has ne above-named estate and may be contacted
Personal Representative Information #1:	
Name:	
Mailing Address:	
Phone Number:	
Personal Representative Information #2:	
Name:	
Mailing Address:	
Phone Number:	
Date:	
	Signature of Personal Representative #1
	Signature of Personal Representative #2

\*Note: If more than two representatives are appointed for an estate, please attach additional page with information for additional Personal Representative(s) or modify form