

STATE OF MICHIGAN PROBATE COURT COUNTY OF CASS	Additional Interested Parties	File No.
---	--------------------------------------	-----------------

ADDENDUM TO PC _____

NAME	ADDRESS			RELATIONS HIP (Heir / Devisee)	AGE/ DOB (if minor)
	Street address				
	City	State	Zip		
	Street address				
	City	State	Zip		
	Street address				
	City	State	Zip		
	Street address				
	City	State	Zip		
	Street address				
	City	State	Zip		
	Street address				
	City	State	Zip		
	Street address				
	City	State	Zip		