

Commonwealth of Massachusetts
The Trial Court

Middlesex Division

Probate and Family Court Department

Docket No. _____

Allowance of Foreign Will

Name of Decedent _____

Domicile at Death _____
(Street and No.) (City or Town) (County) (zip)

Date of Death _____

Will Allowed _____
(Date) (Court) (State)

Copy of will and of probate duly authenticated filed herewith, Locus of Property in Massachusetts _____
(County)

Name and address of Petitioner(s) _____
Status _____

Heirs at law or next of kin of deceased including surviving spouse:

Name	Residence (minor and incompetents must be so designated)	Relationship

The petitioner(s) hereby certif _____ that a copy of this document, along with a copy of the decedent's death certificate has been sent by certified mail to the **Division of Medical Assistance, P.O. Box 15205, Worcester, Massachusetts 01615-9906.**

Petitioner(s) pray(s) that the copy of said will be filed and recorded in the Registry of Probate for the County of _____ and that he/she/they be appointed execut _____/administrat _____ - with the will annexed -, thereof, with/without surety on his/her/their bond(s) and certif _____ under the penalties of perjury that the foregoing statements are true to the best of his/her/their knowledge and belief.

Date _____ Signature(s) _____

The undersigned hereby assent to the petition.

DECREE

Public notice having been given according to the law and it appearing that there is estate in said County of _____ on which said will may operate; and that the original will has been proved in the State of _____ according to the law of said State and ought to be allowed in this Commonwealth as the last will and testament of said deceased; it is therefore ordered that the copy of said will be filed and recorded in said Registry and that _____ of _____ in the County of _____ be appointed execut _____/administrat _____ - with the will annexed - therefore, first giving bond, with _____ sureties for the due performance of said trust.

Date _____

For Petitioner:

Tel. No. () _____

B.B.O. # _____

For Respondent:

Tel. No. () _____

B.B.O. # _____

Publication in the _____

Docket No. _____

Allowance Of Foreign Will

Petition – Decree

Filed _____,20____

Citation Issued _____,20____

Returnable _____,20____

Allowed _____,20____

Recorded Vol. _____ Page _____

Instructions

Refer to Massachusetts General Laws Chapter 192. Section 9.