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| --- | --- | --- |
| STATE OF SOUTH CAROLINA | ) | IN THE PROBATE COURT |
|  | ) |  |
| COUNTY OF: CALHOUN | ) |  |
|  | ) | **PROOF OF DELIVERY** |
| IN THE MATTER OF: | ) |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | ) | CASE NUMBER: |
| (Decedent) | ) |  |

On \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 202\_, I mailed or delivered the following document(s):

Information to Heirs / Devisees

A copy of which is attached hereto and incorporated herein, or

The original of which is on file with the Court.

Delivery was accomplished by the following method (check appropriate box):

personal delivery or  ordinary first-class mail

certified mail  registered mail

commercial delivery  electronic message (Article 7, Trust matters only)

to each of the following persons at the address shown:

|  |  |  |
| --- | --- | --- |
| **NAME** |  | **ADDRESS** |
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| SWORN to before me this | | |  | | day of | | | | Signature: | |  | |
|  | | , 20 | |  | | |  | Print Name: | |  | |
|  | | Address | |  | |
|  | | | | | |  | |  | |  | |
| Notary Public for South Carolina | | | |  | | |  | | Telephone (Work): | |  | |
| My Commission Expires: | |  | | | | |  | | (Home): | |  | |
|  | | | | | | | | | (Cell): | |  | |
|  | | | | | | | | | E-mail: | |  | |
|  | | | | | | Relationship to Decedent/Estate: | | | | |  | |