

**STATE OF SOUTH CAROLINA
COUNTY OF GREENVILLE**

**IN THE PROBATE COURT
CASE NUMBER: _____**

IN THE MATTER OF:)
_____)
Deceased)

NOTICE OF HEARING

DATE:

TIME:

PLACE:

DESCRIPTION OF HEARING:

Executed this _____ day of _____, 20_____.

Signature: _____

Name: _____

Address: _____

Telephone (O): _____

(H): _____