

STATE OF MICHIGAN  
PROBATE COURT  
COUNTY OF

REGISTRATION OF TRUST

FILE NO.

In the matter of \_\_\_\_\_  
Name of trust

1. Trust Settlor(s): \_\_\_\_\_

2. Original Trustee(s): \_\_\_\_\_

3. Present Trustee(s): \_\_\_\_\_ . State address(es):  
\_\_\_\_\_

4. Date(s) of trust instrument and any amendments: \_\_\_\_\_

5. The principal place of administration of this trust is Michigan.

6.  a. The terms of the trust designate this county as the place for registration.

b. The principal place of administration of this trust is in this county because

the trustee's usual place of business where the records pertaining to the trust are kept is in this county at \_\_\_\_\_ .

the trustee does not have a place of business where the records pertaining to the trust are kept and the trustee's residence is in this county at \_\_\_\_\_ .

7. This trust  is  is not registered elsewhere.

\_\_\_\_\_  
Name and address of other registration

8. The trust is created by the will of \_\_\_\_\_ , whose last will and testament was admitted  
Name  
to probate in the probate court of \_\_\_\_\_ County, \_\_\_\_\_ , on \_\_\_\_\_ .  
State Date

9. The trust is an oral trust created by \_\_\_\_\_  
Name  
on \_\_\_\_\_ in the following manner: \_\_\_\_\_  
Date

Terms of the oral trust, including the subject matter, beneficiaries, and time of performance are \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Attorney signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Attorney name (type or print) Bar no.

\_\_\_\_\_  
Trustee signature

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, state, zip Telephone no.

\_\_\_\_\_  
City, state, zip Telephone no.

Do not write below this line - For court use only