

Court of Common Pleas of Westmoreland County  
Orphans' Court Division  
**Cover Sheet**

		FOR COURT USE ONLY	
		ASSIGNED TO JUDGE	
NAME OF ESTATE		ORPHANS' COURT NO:	
TYPE OF ESTATE <input type="checkbox"/> Decedent's Estate <input type="checkbox"/> Trust Inter Vivos <input type="checkbox"/> Testamentary Trust <input type="checkbox"/> Incapacitated Person <input type="checkbox"/> Minor <input type="checkbox"/> Principal (power of attorney) <input type="checkbox"/> Non-profit <input type="checkbox"/> Other (specify) _____			
FILING PARTY'S RELATIONSHIP TO ESTATE			
PLEADING OR DOCUMENT FILED			
NAME OF FILING PARTY (NOT COUNSEL FOR PARTY)		ADDRESS	
<b>ATTORNEYS MUST CHECK ONE BOX TO THE CLERK OF ORPHANS' COURT:</b> <input type="checkbox"/> Kindly Enter my appearance on behalf of <input type="checkbox"/> I have entered my appearance on behalf of			
NAME OF FILING ATTORNEY OR PARTY		ADDRESS	
PHONE NUMBER	FAX NUMBER		
SUPREME COURT IDENTIFICATION NO.		EMAIL ADDRESS	
SIGNATURE OF FILING ATTORNEY OR PARTY		DATE	
OTHER PARTIES (Name, address, and telephone number of unrepresented parties or all counsel already of record. If needed, use separate sheet)			