

Personal Representative's
A (GUIDE
TO
INFORMAL PROBATE
IN WISCONSIN

Developed by the
Wisconsin Register in Probate Association
Revised May 2005

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WHAT IS THE PURPOSE OF THIS BOOKLET?

This booklet has been developed by the Wisconsin Register in Probate Association. It is NOT meant to provide legal advice; it is merely a guide that may help you through the informal probate process.

We suggest that you review the terms under "Definitions" on page 9 before reading on.

HOW CAN I TELL IF INFORMAL PROBATE IS THE WAY TO GO?

First you should determine if the decedent died testate (with a Will) or intestate (without a Will). It is important that you make a diligent search for any Last Will and Testament of the decedent. If after a diligent search you find no Will, it may be that the decedent has left no Last Will and any probate will be done "intestate" (without a Will). If the decedent has not advised you where their original Will can be located, some places to search might include: a safety deposit box in the decedent's bank; the safe or fire box at their home or wherever the decedent kept their other important papers; some Probate offices keep original Wills on deposit for "safekeeping"; or maybe the attorney's office that drafted the Will still has the original.

Next, make a list of the heirs under the statutes (see Intestate Succession Chart on page 10). Then, make a list of the beneficiaries (those named in the Will, if the decedent had one).

Finally, make a list of all assets in which the decedent had an interest. Include real estate and all personal property (i.e. cash, CD's, stocks, bonds, vehicles, machinery, promissory notes, etc.). The list should include the estimated value of each asset and how each asset is owned (i.e. solely, jointly, marital, payable at death, etc.). If you are not able to obtain all this information because the assets are solely owned, just make the best list you can for now; the exact details can be resolved later.

You are now ready to determine the type of probate procedure required to settle the final affairs of the decedent. Choosing the right procedure is very important. It is encouraged that you discuss the decedent's Will, the working relationship between the heirs and/or beneficiaries and the decedent's asset situation as determined above with your local Probate office and/or an attorney.

If it appears that informal probate is the preferred procedure, read on.

DO I NEED AN ATTORNEY TO DO INFORMAL PROBATE?

While Wisconsin statutes do not require you to hire an attorney to probate an estate informally, you may seek advice or the services of an attorney at any point during the process. Also, at any time during the probate process, a demand for formal proceedings may be filed with the court, at which time the services of an attorney may be necessary.

It is important for you to remember that most Probate Registrars are not attorneys. Even if your local Registrar is an attorney, statutes prohibit Registrars from giving legal advice. A Registrar's role is to guide you NOT advise you.

HOW DO I START AN INFORMAL PROBATE?

The following startup forms are always required:

Application for Informal Administration
Proof of Heirship
Consent to Serve
(may include Appointment/Acceptance of Resident Agent)
Statement of Informal Administration
Domiciliary Letters

If you have obtained the signatures of all interested persons on the Waiver and Consent form, the following forms are also required:

Waiver and Consents
Notice to Creditors

If you have not obtained the signature of the interested persons on the Waiver and Consent form, you will be required to complete this form instead:

Order Giving Notice to Interested Persons
And Limiting Time for Filing Claims

The Probate Registrar may require the following documents depending on local practice and who the heirs/beneficiaries are:

Signature Bond
(or a Surety Bond that is obtained from an insurance agent)
Affidavit of Mailing
Letters of Trust
Probate Claims Notice
Declination to Act as Personal Representative
Order Appointing Guardian ad Litem or Counsel
Order Dispensing with Guardian ad Litem

You are now ready to file the informal probate action. It is always advisable (and in some counties required) that you set an appointment to see the Probate Registrar or a designated staff member when you are ready to file the above documents. (Don't forget to bring the Will/Codicil/Marital Property Agreement, if any.)

HOW DO I FINISH THE INFORMAL PROBATE?

The following documents are required to be filed in an informal probate:

Affidavit or Proof of Publication
Inventory with Filing Fee
Affidavit of Mailing
(of Inventory to Heirs/Beneficiaries)
Estate Receipts
(from Heirs/beneficiaries and claimants)
Personal Representative's Statement to Close Estate

The Probate Registrar may require the following documents depending on local practice and/or the particulars of the estate you are probating:

Final Account
Affidavit of Mailing
(of Final Account to Heirs/Beneficiaries)
Closing Certificate for Fiduciaries
Receipt for Perpetual Care or Funeral Receipt
Proof of Recording of Documents Transferring Real Estate
Transfers of Interest in Property
Statement of Termination and Confirmation of Interest in Property

Your local Probate Registrar will advise you of the requirements in your local county.

CAN YOU GIVE ME SOME PRACTICAL SUGGESTIONS?

It is your responsibility to take the Notice to Creditors (or Notice to Interested Persons and Time Limits for Filing Claims) to the newspaper for publication. When you pay the bill for the publication, the newspaper will provide you with an Affidavit or Proof of Publication. File the original Affidavit or Proof of Publication with the Court.

Also, any form that requires notarization of your signature **MUST** be notarized. Remember to wait to sign the document; a notary is supposed to see you actually sign the form. You may be required to produce identification. If you are not going to come to your local probate office to sign the form, you can usually find a notary public at your bank. A notary from another state is acceptable; just have them replace Wisconsin with the name of the state that appointed them notary.

As you gather the decedent's assets in preparation for filing the inventory form, think of the inventory as a snapshot of date of death values of all assets owned by the decedent. Remember that the inventory must be filed no later than 6 months after the appointment of the personal representative. Provide a copy of the Inventory to all interested persons.

If there are claims filed against the estate, you are required to settle with the claimants prior to closing the estate. Once you have settled with the claimants, you must obtain an estate receipt for filing with the court.

You should prepare a final account and furnish copies to all heirs/beneficiaries. Think of the final account as another snapshot of what came in to the estate and what went out of the estate between the date of death and the completion of the estate. This form should be completed only after you have paid all the decedent's outstanding bills including the funeral bill, costs of administration of the estate, any proper claims and all applicable taxes.

An estate can be closed any time after the final date to file claims has run and must be closed within 12 months of the date the probate was opened, pursuant to Supreme Court probate benchmarks.

The personal representative's statement to close estate is normally the final document filed in an estate but it does not mean that you are done. If six months after filing the statement no other proceedings are pending in the court, your appointment as personal representative terminates.

One final thought. Should you need to review statute books, check your public library or the law library at your local courthouse. Statutes are available on line at:

www.legis.state.wi.us/rsb

Within the scope that has been discussed earlier in this booklet, your local Probate Registrar is here to see you through the informal probate process. We hope you have found this booklet helpful. We would welcome your comments on ways we can improve it so that we might better assist others in the future.

WHAT SHOULD I KNOW ABOUT BEING PERSONAL REPRESENTATIVE?

First of all, a statement in a Will about who should serve as personal representative does not automatically allow you to start performing the duties of a personal representative; the statement in the Will is merely a nomination by the decedent. The Probate Registrar must appoint you before you assume the duties of a personal representative. The document that shows others you are appointed as Personal Representative is called "Domiciliary Letters."

For a nominal fee, the Registrar will supply you as many certified copies of this document as you feel you will need at any time throughout the probate process.

Serving as personal representative is a VERY important job. You will be required to take an oath that you will uphold the law and you may be required to post a bond to protect the assets in the estate. You must keep all interested parties informed of the status of the estate proceedings and complete the estate in a timely fashion. Statutory time frames are outlined in the Checklist on pages 11 and 33.

For all practical purposes, a personal representative is acting in place of the decedent. You are expected to handle the assets of the decedent just as any prudent person would handle their own assets.

Your duties will include taking possession of all the decedent's assets and filing an inventory including the date of death values of all assets you have in your control. You will be starting a checking account where you can keep accurate records of income and expenses.

You will give notice to creditors and may give notice to interested persons by publication in the newspaper. Notice must also be given to interested persons by mail or personal service if Waiver and Consent forms cannot be obtained.

You may be converting assets to cash, selling real estate, running a business, insuring and keeping property in good repair.

You will collect any income due to the decedent like interest, dividends, rent, etc. You will pay bills, settle proper claims or object to claims that are not appropriate.

There may be final and fiduciary tax returns to complete. You may be required to file a closing certificate for fiduciaries from the Department of Revenue. You are encouraged to utilize the services of a competent tax preparer or an attorney to help you with this aspect of the estate.

You may be required to file a final accounting showing all money that came in to the estate between date of death and distribution and all money that was paid out of the estate.

You will distribute assets according to the Will and/or statutes and secure receipts from those receiving assets.

Finally, you will file a personal representative's statement to close estate. Six months after the filing of this statement, your duties are complete.

WHAT FORMS WILL I NEED TO COMPLETE?

On the following pages you will find samples of the "usual" informal probate forms you will need to complete. A brief explanation appears just prior to each "Sample" form.

Wisconsin requires that you use the mandatory forms you see in this book. You may purchase a blank set of forms from your local Probate Registrar. The Registrar will tell you whether printing in black pen is allowed or if you are required to type the forms. You may also access the most up to date forms on the internet at the State of Wisconsin Supreme Court website:

<http://www.wicourts.gov/forms1/circuit.htm#probate>

Adobe Acrobat Reader is required to view the forms. If you do not have Adobe on your computer, it can be downloaded from this website. Saving a form to your computer will allow you to complete the form in Microsoft Word and print the form at home.

Remember, the Probate Registrar cannot fill out the forms for you. The Probate Registrar is, however, required by statute to check the data you provide and, if necessary, request further information from you. When the forms are completed satisfactorily, the Probate Registrar will accept them for filing.

DEFINITIONS

Beneficiary: A person named in the Will to receive an interest in property from a decedent; sometimes referred to as legatee.

Bequest and Devise: Used in a last Will and Testament to grant an interest in property.

Codicil: A written document made by the deceased changing an existing Will.

Decedent: The one who has passed away whose estate is subject to administration.

Heir: A person, including a surviving spouse, who under state law is entitled to an interest in property of the decedent.

Interested Person: Includes one or more of the following: 1) an heir of the deceased if named in the Will or not; 2) a beneficiary named in the Will who may include a beneficiary of a trust and a nominated trustee; 3) the Personal Representative named in the Will.

Intestate: An estate left by a person who died without a Will. Distribution of assets follows the statutes of intestate succession.

Issue: Children, grandchildren, great-grandchildren, etc.

Per Stirpes: Property is divided into equal shares for the decedent's children; children of a deceased child share their parent's share (i.e. by right of representation).

Personal Representative: A person nominated in a Will to administer estate affairs in probate proceedings; sometimes known as executor (male) or executrix (female).

Probate: A court-supervised process to: 1) transfer assets of a decedent to heirs or beneficiaries; 2) determine and pay federal and state taxes; and 3) give notice to creditors.

Probate Registrar: The administrative officer appointed in each county to supervise informal probate.

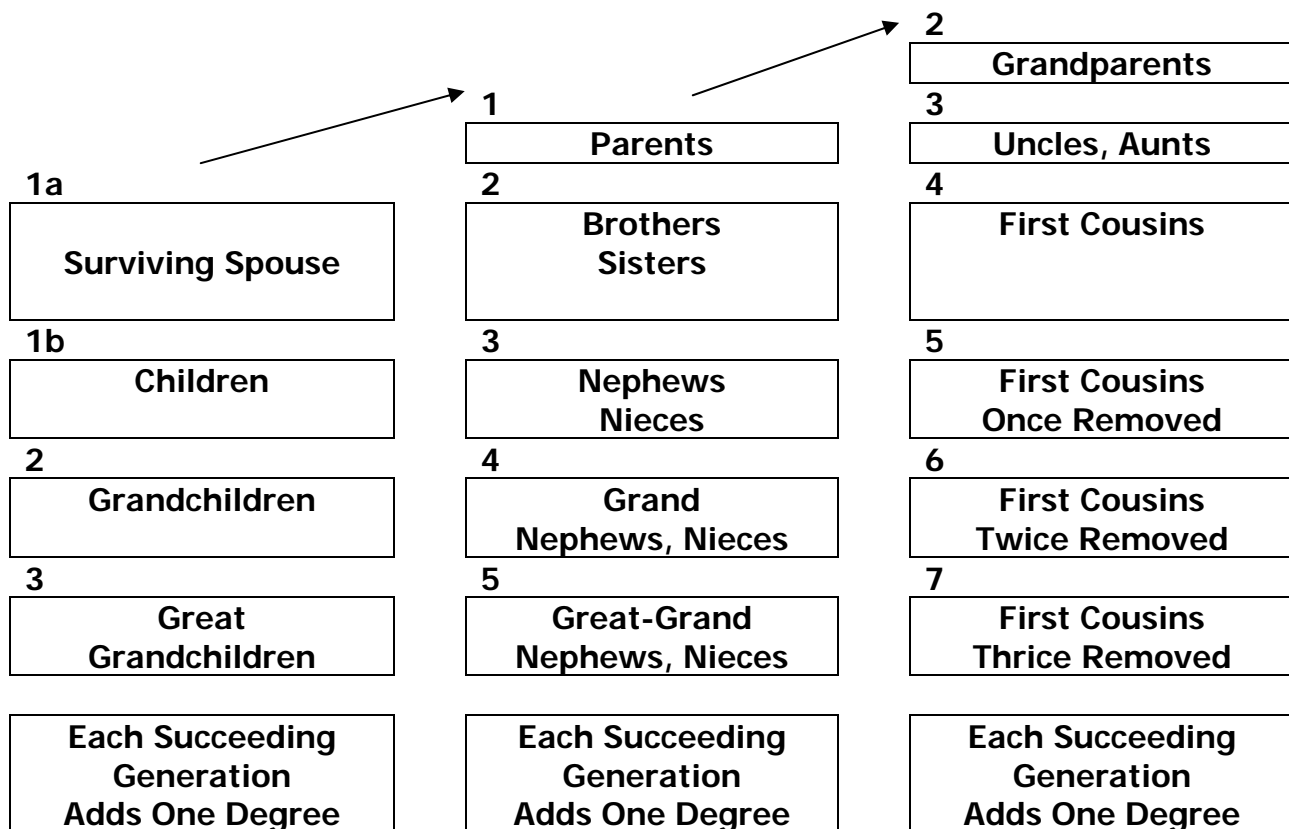
Testate: An estate left by a person who died with a Will. Distributions of assets follow the Will.

Testamentary Trust: An arrangement outlined in a Will in which one party (sometimes a bank) holds and distributes property for the benefit of another.

Will: A document properly executed prior to death that directs distribution of property after death, nominates who will care for and distribute property. It may nominate someone to care for minor children and/or handle assets in a testamentary trust.

INTESTATE SUCCESSION CHART

Per Sec. 990.001(16), Wis. Stats.



Also See Sec. 852.01, Wis. Stats., basic rules of intestate succession.

**CHECKLIST FOR OPENING
AN INFORMAL PROBATE PROCEEDING**

TO OPEN AN ESTATE/RECEIVE DOMICILIARY LETTERS	
	Application for Informal Administration (PR-1801)
	Proof of Heirship (PR-1806)
	Original Will (and Codicils, if any)
	Declination to Act (if necessary) (PR-1802)
	Order Appointing Guardian ad Litem (if required) (GF-131)
	Waiver and Consent (PR-1803)
	Consent to Serve (PR-1807)
	Statement of Informal Administration (PR-1808)
	Signature Bond (PR-1809) or Security Bond (if requested)
	Domiciliary Letters (PR-1810)
	Notice to Creditors (PR-1804) OR
	Notice to Interested Persons and Time Limit for Filing Claims (PR-1805)
	Probate Claims Notice (if required) (#HCF-13033)
	Notice Concerning Fiduciary Relationship (IRS Form 56)

Application for Informal

Form No. PR-1801 (Rev. 10/01/2003)

Purpose of Form: To apply to the Probate Registrar for informal administration of an estate

Directions:

Type or print the name of deceased's county at the top of the Application and just below the words "In the Matter of the Estate of..." insert the name of the deceased.

Leave the case number blank, as the Probate Registrar will assign the case number.

1. Insert the deceased's:
 - a) date of birth
 - b) date of death
 - c) county in which they were domiciled
 - d) post office address
2. You must indicate your relationship to the deceased. Are you a son, a daughter, a niece, etc? Or, are you not related to the deceased, but the person nominated as Personal Representative in the Will?
3. Check the appropriate box to indicate whether or not there is another estate open for this decedent.
4. You must insert an "estimate" of the total gross value of decedent's assets that are subject to this estate proceeding.
5. Please check the appropriate boxes concerning assistance programs from which the deceased may have received aide.
6. This question MUST be answered. Indicate the name of the spouse, whether deceased or previously divorced and check the appropriate boxes concerning benefits. If there was more than one spouse, check the box and attach a separate page with the name and other appropriate information.
7. If the deceased had a Will or a Codicil include that information at this time. Also indicate the name of the person nominated in the deceased's Will as the Personal Representative or Executor. If more than one person has been nominated as "Co-Personal Representative", include the name and address for each party.

If any person nominated as Personal Representative is now deceased, please include their name and date of death. Also indicate the name of the alternative personal representative and his or her address.

If the Will provides for a Trust to be administered by a Trustee (a Testamentary Trust), insert the name and address of the person so nominated as Trustee.

8. If the deceased person had no Will, check this box.
9. Insert the name, relationship, and address of each "interested person". Please refer to the "definitions" section regarding who is an interested person.

List the names of all the "interested persons" whether or not they are actually named in the Will. Also include any minors and their date of birth, and anyone who has been found to be incompetent and the name of their Guardian.

If the Will provides for a Testamentary Trust and Trustee you must also include the name of the Trustee as an interested person and prepare Letters of Trust that must be issued at the same time as the Domiciliary Letters.

If the deceased had a Living Trust and the trust will receive the residue of the estate, please list the name of the Trustee(s) of that trust.

Below the words: "I request that:" check all boxes that apply and indicate what you are asking the Probate Registrar to do.

In the box indicated, type the name and address of the person who is applying to open this proceeding.

You must sign this form in front of a Notary Public or the Registrar may instruct you to wait and sign the form at the time you bring it back to the office to open the estate. In that case, the Registrar will notarize your signature.

IN THE MATTER OF THE ESTATE OF

Application for
Informal
Administration

SAMPLE

DENNY DECEDENT

Deceased _____

Case No. _____

Under oath, I state that:

1. The decedent, whose date of birth was December 22, 1910, and date of death was August 1, 2001, died domiciled in name of deceased's county County, State of Wisconsin, with a post office address of: 123 Something Street, Someplace, Wisconsin 55555.

2. I am interested as daughter.

3. Other proceedings concerning the estate of the decedent are are not pending in this state or elsewhere. Explain: _____

4. The estimated gross value of decedent's property requiring administration is \$200,000.00.

5. The decedent

- did did not receive medical assistance.
- did did not receive family care benefits (through a Care Management Organization – CMO).
- did did not receive benefits from the Community Options Program (COP).
- did did not receive benefits from Wisconsin Chronic Disease Program.
- was was not a patient or inmate of a state or county hospital or institution, or responsible for any person owing an obligation to the state or county.

Explain: _____

6. If the decedent was ever married, complete the following: If more than one spouse, see attached. Name of spouse (living or deceased): SALLY DECEDENT.

- did did not receive benefits from the Community Options Program (COP).
- did did not receive benefits from the Wisconsin Chronic Disease Program.

(Complete section 7 or 8 below, whichever is applicable.)

7. The decedent died leaving a Will, dated May 25, 1998. codicil(s), dated _____.

I believe these documents to have been executed properly and to be valid and have made diligent inquiry and am unaware of any subsequent revocation.

The original Will, including codicil(s), if any

- is in the possession of the court. accompanies this application.
- was probated elsewhere and an authenticated copy accompanies this application.

The personal representative(s) named by the decedent is

Name: Mary Smith

Post office address: 555 Blank Street, Sometown, Wisconsin 51111

The trustee(s) named by the decedent is

Name: _____

Post office address: _____

8. I have made diligent inquiry and am unaware of any unrevoked Will of the decedent and believe that the decedent died leaving no Will.

9. The names and addresses of all interested persons are:
(Must include any minor(s) with date of birth, incompetent(s) and name of guardian(s) of estate, and any person(s) in the military):

<u>Name</u>	<u>Relationship</u>	<u>Address</u>	<u>D. O. B. if Minor</u>
Mary Smith	Daughter	555 Blank Street Sometown, WI 51111	
John Decedent	Son	888 Circle Drive, Nowhere, IL 61111	

I request that:

- 1. The Will, including codicil(s), be admitted to informal administration.
- 2. A statement of informal administration be issued.
- 3. Domiciliary Letters be issued to Mary Smith
- 4. Letters of Trust be issued to _____
for the following trust _____
Letters of Trust be issued to _____
for the following trust: _____

Subscribed and sworn to before me
on _____

Notary Public/Court Official
My commission expires: _____

Name of Attorney	
Address	
Telephone	Bar Number

Signature of Applicant
Name Printed or Typed Mary Smith
Address 555 Blank Street Sometown, WI 51111

DENIAL OF APPLICATION: (Signature of Probate Registrar only required if application is denied.)

- The application for informal administration has been reviewed and is denied.
The denial of an application is not an adjudication and does not preclude proceeding formally.

Probate Registrar

Name Printed or Typed

Date

Proof of Heirship
(Informal and Formal Administration)

Form No. PR-1806 (Rev. 10/20/2000)

Purpose of Form: To establish under oath the person(s) who are the heirs of the decedent.

To be completed by the person seeking to prove heirship.

Directions:

Page 1

1. Fill in the name of deceased's county of residence
2. Fill in name of decedent.
3. Check the box for "Informal" probate.
4. The Probate Registrar will fill in the case number.
5. Under number 1, fill in your name, address and relationship to the deceased.
6. Under number 2, check the appropriate box. If the deceased was survived by a spouse, fill in the name of the spouse.
7. Under 3a, check the appropriate box. If the deceased had children list the names of all children. If any children are deceased, indicate the date of death.
8. Under 3b, for each deceased child, list the name(s) of their children. If any of those children are deceased, indicate the date of death.
9. Under number 4, indicate whether all of the deceased's children are also the children of any surviving spouse. If the answer to this question is "no", then provide details.

Page 2

If there are living persons named in questions 2 through 4 on page 1, then go to question number 8.

If there are no living persons named in questions 2 through 4, then go to question number 5.

1. Under number 5, check the appropriate box; if the answer was "yes", then fill in the name of the parent(s).
2. Under number 6a, check the appropriate box; if the answer was "yes", then fill in the name(s) of the living and deceased brothers or sisters and indicate the date of death if deceased.
3. Under number 6b, list the name of each deceased brother or sister as noted in 6a and also list the names of his or her children. If any of those children are deceased, indicate the date of death and the names of his or her children.
4. At No. 7, read the information on the form and fill in any names if applicable.
5. Question No. 8 MUST BE ANSWERED.
6. Sign and date the form in front of a Notary Public.

The original of this form is filed with the Probate Registrar along with the Application for Informal Administration (PR-1801). A copy of this form is sent to all interested persons.

IN THE MATTER OF THE ESTATE OF

Proof of Heirship

DENNY DECEDENT

Informal

Formal

S A M P L E

Deceased _____

Case No. _____

Under oath, I answer the following questions:

1. What is your name, address and relationship to the decedent?		
<u>Name</u>	<u>Address</u>	<u>Relationship</u>
Mary Smith	555 Blank Street, Sometown, WI 51111	Daughter
2. Was the decedent survived by a spouse? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, give name:		
3a. Did the decedent have any children? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (living or deceased; natural or adopted) If YES, list all names: (If deceased, indicate date of death.)		
<u>Name</u>		
Mary Smith		
John Decedent		
3b. For each deceased child in 3a, list his or her name and the names of his or her children (living or deceased; natural or adopted). If any of his or her children are deceased, indicate the date of death of that child and his or her descendants (living or deceased; natural or adopted). <input type="checkbox"/> See attached schedules.		
<u>Name</u>		
N/A		
4. If there is a surviving spouse, are all of the decedent's children listed in 3a, also the children of the surviving spouse? <input type="checkbox"/> Yes <input type="checkbox"/> No If NO, give details:		
N/A		
Instructions: Are there living persons listed in answers to questions 2 through 4?		
<ul style="list-style-type: none"> • If yes, go to question 8. • If no, go to question 5. 		

5. Did the decedent leave surviving parents? Yes No
 If YES, list names:
Name

6a. Did the decedent have brothers or sisters? Yes No
 (living or deceased; whole blood, half blood, adopted)
 If YES, list all names: (If deceased, indicate date of death.)
Name

6b. For each deceased brother or sister in 6a, list his or her name and the names of his or her children (living or deceased; natural or adopted). If any of his or her children is deceased, indicate the date of death of that child and his or her descendants (living or deceased; natural or adopted). See attached schedules.
Name

7. If there are no living persons listed in questions 2 through 6, list names and trace the relationship of any other persons related to the decedent on the decedent's paternal (father) side and the decedent's maternal (mother) side: See attached schedules.
Name Explain Relationship

8. Did any of the persons named in questions 2 through 7 die within 120 hours after the death of the decedent? Yes No
 If YES, list names:
Name

Subscribed and sworn to before me
 on _____

 Formal: Court Official
 Informal: Notary Public/Court Official
 My commission expires: _____

 Signature
 Mary Smith
 Name Printed or Typed

 Date

Name of Attorney	Telephone Number
Address	

Waiver and Consent

Form No. PR-1803 (Rev. 10/20/2000)

Purpose of Form: To obtain waivers of notice and consent of all interested persons to the use of informal administration and the appointment of the proposed personal representative. Also waives the need for a hearing to open the estate.

A waiver and consent form must be received from each interested person in the estate before Domiciliary Letters can be issued to the Personal Representative. If the waiver and consent cannot be obtained, a hearing will be required to open the estate.

Directions:

1. At the top of the form, insert the name deceased's county of residence
2. Insert the name of the decedent.
3. Leave the case number blank.
4. Check the appropriate box in Statement 4.
5. Check the appropriate box in Statement 5.
6. Insert the name of the personal seeking to be appointed as Personal Representative.
7. Each interested person or beneficiary must sign and date the form.

*Please note, more than one person may sign on one form.

The original form(s) is filed with the Probate Registrar.

STATE OF WISCONSIN, CIRCUIT COURT, DECEASED'S COUNTY COUNTY

For Official Use

IN THE MATTER OF THE ESTATE OF

DENNY DECEDENT

**Waiver and
Consent
(Informal Administration)**

S A M P L E

Deceased

Case No. _____

- I am by law an interested person in this estate.
- I am not a minor or incompetent.
- I enter my appearance in this matter, and consent to Informal Administration.
- I have received a list of all interested persons, and (*choose one*)
 - a copy of the last Will and testament, including codicil(s), if any, or
 - a notice of the nature and amount of the bequest contained in the Will or codicil dated _____.
 - decedent died leaving no Will.
- I have no objection to (*choose one*):
 - the admission of the Will, including codicil(s), to Informal Administration.
 - Intestate Administration (without a Will).
- I consent to the appointment of Mary Smith
as personal representative in this estate.

Name Printed or Typed	Signature	Date
Mary Smith	Mary signs here	_____
John Decedent	John signs here	_____

Name of Attorney/Personal Representative
Address
Telephone

Consent to Serve
(Informal, Formal, and Special Administration)

Form No. PR-1807 (Rev. 7/06/2001)

Purpose of Form: To provide a written consent to serve as personal representative and acceptance of duties of the office, including designation of resident agent by a nonresident personal representative.

Directions:

Type or print the name of deceased's county at the top of the Application and add the deceased's name just below the words "In the Matter of the Estate of...". Check the box for "Informal Probate". Leave the case number blank.

1. Please read this paragraph.
2. This paragraph only applies if you are required by the Probate Registrar to post a bond before you become the Personal Representative.
3. If you live outside the State of Wisconsin, please check the box in No. 3 and fill in the name of the Wisconsin resident you wish to appoint to accept service on your behalf if that becomes necessary. This person is then known as the "Resident Agent".

Please check with the Register if you must sign this form prior to meeting with the Register or if you must wait until you meet with the Registrar to open the estate.

DO Type the name and address of the Personal Representative where indicated.

On the bottom portion of the form:

If you have to appoint a Wisconsin resident as your "Resident Agent", then you must also have that person sign the bottom of this form, including their address and the date of signing.

STATE OF WISCONSIN, CIRCUIT COURT, DECEASED'S COUNTY COUNTY

For Official Use

IN THE MATTER OF THE ESTATE OF

Consent to Serve

DENNY DECEDENT

Informal
 Formal

SAMPLE

Deceased

Case No. _____

1. I consent to serve as personal representative. special administrator.
I accept the duties and
 - agree to be bound by the laws of this state, and
 - submit personally to the jurisdiction of the court in any proceeding relating to the estate that may be instituted by any interested person.
2. I Will file any required bond.
3. I am a nonresident of Wisconsin and I have applied for letters in this estate.

I appoint _____ as resident agent to accept service of process.

Name

Signature

Mary Smith

Name Printed or Typed

555 Blank Street

Address

Sometown, WI 51111

Date

Acceptance By Resident Agent

I accept this appointment as resident agent.

Signature of Resident Agent

Name Printed or Typed

Address

Date

Name of Attorney	
Address	
Telephone Number	Bar Number

Statement of Informal Administration

Form No. PR-1808 (Rev. 5/01/2002)

Purpose of Form: To grant the Application for Informal Administration and allow Domiciliary Letters to be issued to the proposed Personal Representative.

Directions:

1. At the top of the form insert the name of the deceased's county of residence and add the deceased's name just below the words "In the Matter of the Estate of..."
2. The Registrar will insert the case number.
3. In No. 4, place a check in the appropriate box:
Check the first box if notice to interested persons had to be published.
Check the second box if all interested persons signed a Waiver and Consent form
4. In No. 5:
 - a) Insert the date of death
 - b) Place a check in the appropriate box to indicate whether or not there is a Will.
 - c) Insert the date of any Will and codicil, if any.
 - d) Place a check in the appropriate box indicating where the Will is located.
5. In No. 6, insert the name of the Personal Representative.
6. Read No. 7a and No. 7b and place a check in the appropriate box.
7. Below the words "Therefore" and in No. 2, insert the name of the Personal Representative.
8. If Letters of Trust must also be issued, insert the appropriate information in No. 3.

The Probate Registrar will insert any additional information required on this form and sign and date it.

STATE OF WISCONSIN, CIRCUIT COURT, DECEASED'S COUNTY COUNTY

For Official Use

IN THE MATTER OF THE ESTATE OF

Statement of Informal Administration

S A M P L E

DENNY DECEDENT

Deceased

Case No. _____

An application to initiate informal administration of the estate of the decedent has been received.

The Probate Registrar determines that:

1. The application is complete, including verification.
2. The applicant is an interested person.
3. The court of this county has jurisdiction over this estate.
4. The requests and consents required by law are complete and notice has been
 - given to all persons entitled to notice.
 - waived.
5. The decedent died on (date) August 1, 2001, leaving
 - no Will.
 - a Will dated May 25, 1998; codicil(s) dated _____;
 and the original and apparently unrevoked Will, including codicil(s), if any,
 - is in possession of the court.
 - accompanies this application.
 - was probated elsewhere and an authenticated copy accompanies this application.
 The Will, including codicil(s), if any, contains an attestation clause showing compliance with the statutory requirements of execution and does not expressly prohibit informal administration.
6. The nominated personal representative(s): Mary Smith

_____ is/are not disqualified by law or otherwise deemed unsuitable.

The Probate Registrar further determines that:

- 7a. No administration is pending either before the court or in another jurisdiction.
- 7b. Administration is pending either before the court or in another jurisdiction and no demand has been made for formal administration. Proof of probate accompanies the application.

Therefore:

1. The application for informal administration is granted and the Will, including codicil(s), if any, is admitted.
2. Domiciliary Letters are issued to: Mary Smith, upon acceptance and filing of:
 - a signature bond a surety bond in the sum of \$ _____ is required.
 - no bond is required.
3. Letters of trust are issued to _____ for the following trust: _____, upon acceptance and filing of:
 - a signature bond a surety bond in the sum of \$ _____ is required.
 - no bond is required.
 Letters of trust are issued to _____ for the following trust: _____, upon acceptance and filing of:
 - a signature bond a surety bond in the sum of \$ _____ is required.
 - no bond is required.

Name of Attorney	Telephone Number
Address	

 Probate Registrar

 Name Printed or Typed

 Date

Domiciliary Letters

Form No. PR-1810 (Rev. 10/20/2000)

Purpose of the Form: Written authority to a Personal Representative to act on behalf of the estate.

Directions:

1. At the top of the form insert the name of the deceased's county of residence and add the deceased's name just below the words "In the Matter of the Estate of..."
2. The Probate Registrar will fill in the case number.
3. Fill in the section after "To:" with the name and address of the Personal Representative.
4. Fill in the date of birth, date of death, county and state.
5. The Probate Registrar will sign this form and complete the signature area.
6. In the lower left-hand corner of the form fill in the name, address and telephone number of the Personal Representative or Attorney for the estate.

Certified copies of the Domiciliary Letters are available for a fee from the office of the Register in Probate.

STATE OF WISCONSIN, CIRCUIT COURT, DECEASED'S COUNTY COUNTY

For Official Use

IN THE MATTER OF THE ESTATE OF

**Domiciliary Letters
(Informal Administration)**

S A M P L E

DENNY DECEDENT

Deceased

Case No. _____

To: MARY SMITH
555 Blank Street
Sometown, WI 51111

The decedent, whose date of birth was December 22, 1910 and date of death was August 1, 2001,
died domiciled in Deceased's County County, State of Wisconsin.

You are granted domiciliary letters with general powers and duties of a personal representative.

Seal

LETTERS ISSUED BY

Probate Registrar

Name Printed or Typed

Date

Name of Attorney/Personal Representative
Address
Telephone Number

Notice to Creditors (Informal Administration)

Form No. PR-1804 (Rev. 06/01/2000)

Purpose of Form: To set a deadline for filing claims in an informal administration in which all interested persons have signed waivers consenting to informal administration.

Directions:

1. At the top of the form insert the name of the deceased's county of residence and add the deceased's name just below the words "In the Matter of the Estate of...".
2. The Probate Registrar will fill in the case number.
3. First paragraph: fill in date of birth, date of death, county, state and decedent's address.
4. The Probate Registrar will fill in the claims date.
5. Fill in the name of the newspaper.
6. In the lower left-hand corner of the form fill in the name, address and telephone number of the Personal Representative.
7. The Register in Probate will provide a copy to the Personal Representative.
8. The Personal Representative is responsible for forwarding the Notice to the newspaper for publication.
9. The Personal Representative is responsible for mailing the Notice to "all known or reasonably ascertainable creditors" as indicated on the form.

STATE OF WISCONSIN, CIRCUIT COURT, DECEASED'S COUNTY COUNTY

For Official Use

IN THE MATTER OF THE ESTATE OF

Notice to Creditors
(Informal Administration)

S A M P L E

DENNY DECEDENT

Deceased

Case No. _____

An application has been filed for informal administration of the estate of the decedent, whose date of birth was December 11, 1910 and date of death was August 1, 2001. The decedent died domiciled in Deceased's County County, State of Wisconsin, with a post office address of: 123 Deceased's Street, Someplace, WI 55555.

All interested persons have waived notice.

Creditors' claims must be filed with the probate registrar on or before _____
Date

*This notice shall be published once a week for three consecutive weeks in the following newspaper: Official County Newspaper.

The first publication date shall be within 15 days from the date of this notice.

*The personal representative is responsible for mailing this notice to all known or reasonably ascertainable creditors.

Mary Smith

Personal Representative/Attorney

Probate Registrar

555 Blank Street

Address

Name Printed or Typed

Sometown, WI 51111

Date

715-999-9999

Phone Number

***Notice to Printer - DO NOT PRINT this text when publishing notice.**

Notice to Interested Persons and Limiting Time for Filing Claims
(Informal)

Form No. PR-1805 (Rev. 10/20/2000)

Purpose of Form: To give notice to interested persons of the filing date of the Application for Informal Administration; to give notice to creditors and set the deadline for filing claims.

Directions:

1. Insert the name of the deceased's county.
2. Insert the name of decedent.
3. The Probate Registrar will fill in the case number.
4. First paragraph: Fill in date of birth, date of death, county, state and decedent's address.
5. Under "Please take notice that:"
 - a) Fill in deceased's county in No. 1.
 - b) The Probate Registrar will fill in the remaining information in No. 1
 - c) The Probate Registrar will fill in the date in No. 2.
 - d) Fill in the answer to No. 3, if known.
6. Under "Notice shall be given by publication...":
 - a) Fill in the name of the newspaper.
 - b) Follow the instructions noted on the form.
7. In the lower left-hand corner of the form fill in the name, address and telephone number of the Personal Representative or Attorney for the estate.
8. The Probate Registrar will sign the form.
9. The Probate Registrar will provide a copy for the Personal Representative.
10. The Personal Representative is responsible for forwarding this Notice to the newspaper for publication.
11. The Personal Representative is also responsible for mailing a copy of this Notice, a copy of the Application for Informal, and a copy of the Will to all interested persons.
12. The Personal Representative is also responsible for mailing a copy of this Notice to all known or reasonably ascertainable creditors.
13. The Personal Representative must also complete an Affidavit of Mailing (Form PR-1817) indicating when a copy of this notice was provided to all parties.

STATE OF WISCONSIN, CIRCUIT COURT, DECEASED'S COUNTY COUNTY

For Official Use

IN THE MATTER OF THE ESTATE OF

Notice to Interested Persons
and Time Limit for Filing Claims
(Informal Administration)

S A M P L E

DENNY DECEDENT

Deceased.

Case No. _____

An application has been filed for informal administration of the estate of the decedent, whose date of birth was December 11, 1910 and date of death was August 1, 2001. The decedent died domiciled in Deceased's County County, State of Wisconsin, with a post office address of : 123 Deceased's Street, Someplace, WI 55555.

Please take notice that:

1. The application Will be heard at the Deceased's County County Courthouse, _____ Wisconsin, Room _____, before _____, Probate Registrar, on _____, at _____ or when scheduled thereafter.
Date Time

You need not appear unless you object. The application may be granted if no objection is made.

2. Creditors' claims must be filed with the probate registrar on or before _____ Date
3. Publication of this notice shall constitute notice to any persons whose names or addresses are unknown.
**The names or post office addresses of the following persons interested (if any) are not known or reasonably ascertainable: _____

*Notice shall be given by publication of this notice once a week for three consecutive weeks in the following newspaper: Official County Newspaper

The first publication date shall be within 15 days from the date of this notice; AND

1. By mailing, at least 20 days before the hearing, a copy of this notice and a copy of the Will to every person entitled to notice; OR
2. By personal service, at least 10 days before the hearing.

* The personal representative is responsible for mailing this notice to all known or reasonably ascertainable creditors.

If you need help in this matter because of a disability, please call:

Probate Registrar

Name Printed or Typed

Date

Please check with personal representative/ attorney below for exact time and date.

Personal Representative/Attorney

Mary Smith

Address

555 Blank Street
Sometown, WI 51111

Telephone Number

715-999-9999

***Notice to Printer - DO NOT PRINT this text when publishing notice. **DO NOT PRINT this text if left blank.**

Probate Claims Notice

Form No. HCF- 13033 (Rev. 11/02)

Purpose of Form: To provide written notice to the Department of Health and Social Services of the decedent's date of death and whether or not the decedent or decedent's spouse received medical assistance.

Directions:

1. Fill in name of decedent.
2. Fill in name of county.
3. Fill in Social Security Number of deceased.
4. Insert the type of probate.
5. Fill in the date of death.
6. The Probate Registrar will fill in the case number.
7. Fill in the date of birth.
8. The Probate Registrar will fill in the "final date to file claims".
9. If the deceased received Medicaid benefits, etc. check the box.
10. If the decedent's predeceased spouse received benefits, check the box.
11. Fill in the name of the predeceased spouse and Social Security Number.
12. Fill in the Personal Representative's name and address where indicated.
13. Fill in the name and address of the attorney for the estate if appropriate.
14. Mail a copy of this document by certified mail, return receipt requested to the following:
 - a) State of Wisconsin, Department of Health and Family Services.
 - b) County Clerk of the county in which the deceased was a resident.
 - c) Original document is filed with the Probate Registrar.
 - d) Also file the certified mail cards showing that the County Clerk and the Department received this Probate Claims Notice from you.

DEPARTMENT OF HEALTH & SOCIAL SERVICES

Division of Health Care Financing
HCF 13033 (Rev. 11/02) (formerly known as HCF 1075)

STATE OF WISCONSIN

Wisconsin Statutes
Section 859.07

PROBATE CLAIMS NOTICE

Completion of this form is required according to Wisconsin Statutes ss. 859.07(2), 867.01(3)(d), and 867.02(2)(d). Personal identifying information will only be used in the administration of the Estate Recovery Program and will not be disclosed to other agencies. Failure to complete this form is covered under Wisconsin Statutes ss. 859.02 and 867.17.

In the Matter of the Estate of:	STATE OF WISCONSIN, Circuit Court Branch
Name of Deceased	County
Social Security Number	Type of Probate
Date of Death	File Number
Date of Birth	Final Date to File Claims

- Check here if the Deceased received any of the following:
 - Medicaid benefits under s. 49.46 or 49.47, Wis. Stats.
 - Medicaid Community Waiver Program(s) benefits under s. 46.27 through 46.278, Wis. Stats.;
 - Medicaid or Non-Medicaid Family Care benefits under s. 46.286, Wis. Stats.;
 - Medicaid Purchase Plan (MAPP) benefits under s. 49.472, Wis. Stats.;
 - Wisconsin Community Options Program (COP) benefits under s. 46.27, Wis. Stats.;
 - Wisconsin Chronic Disease Program (WCDP) benefits under s. 49.68 through 49.685, Wis. Stats.
- Check here if a predeceased spouse of the Deceased received any of the following and include his/her name and Social Security Number below (if more than one spouse please attach additional sheet):
 - Wisconsin Community Options Program (COP) benefits under s. 46.27, Wis. Stats.
 - Wisconsin Chronic Disease Program (WCDP) benefits under s. 49.68 through 49.685, Wis. Stats.

Name of predeceased Spouse _____ SSN of predeceased Spouse _____
 (Disclosure of Social Security Number of a Medicaid recipient is mandatory per 42 U.S.C. 1320b-7)
 (Disclosure of Social Security Number of a non-Medicaid recipient is voluntary. The Social Security Number will only be used for the identification of COP and WCDP recipients and for the administration of the Estate Recovery Program)

Name of Personal Representative/Petitioner	Mailing Address
Name of Attorney	Mailing Address

***** PROOF OF MAILING *****

I, _____* insert your name_____being duly sworn on oath certify that on the _____ day of _____, 20_____, mailed via the U.S. Postal Service, by registered or certified mail, a true and correct copy of this Notice to the State of Wisconsin and to the County Clerk of the decedent's county of residence, and I have filed the original Notice with the Register in Probate for the county listed above as required by ss. 859.07, 867.01 and 867.02., Wis. Stats. They have been mailed as follows

Original to: Register in Probate Of county listed above	Copy to: STATE OF WISCONSIN Department of Health and Family Services Estate Recovery Program Section P.O. Box 309 Madison, WI 53701-0309	Copy to: COUNTY CLERK of the decedent's county of residence
----------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------

Subscribed and sworn to before me
on _____

Notary Public/Court Official
My commission expires _____

Signature

Notice of Fiduciary Relationship

IRS Form 56 (Rev. July 2004)

Purpose of the form: To give notice to the Internal Revenue Service of the deceased's death and your fiduciary relationship as Personal Representative of the Estate.

Directions:

Instructions from IRS available on the web at:

<http://www.irs.gov/file/article/0,,id=111170,00.html>

Downloadable forms (printable and fillable) available on the web at:

<http://www.irs.gov/pub/irs-pdf/f56.pdf>

From the IRS website:

"The term fiduciary means any person acting for another person. It applies to persons who have positions of trust on behalf of others. A personal representative for a decedent's estate is a fiduciary.

If you are appointed to act in any fiduciary capacity for another, you must file a written notice with the IRS stating this. Form 56, Notice Concerning Fiduciary Relationship, can be used for this purpose. The instructions and other requirements are given on the back of the form.

You should file the written notice (or Form 56) as soon as all of the necessary information (including the EIN) is available. It notifies the IRS that, as the fiduciary, you are assuming the powers, rights, duties, and privileges of the decedent, and allows the IRS to mail to you all tax notices concerning the person (or estate) you represent. The notice remains in effect until you notify the appropriate IRS office that your relationship to the estate has terminated."

WHERE TO FILE:

Because the deceased was a Wisconsin resident, please file this document at:

Internal Revenue Service
Cincinnati, OH 45999-0042

SAMPLE ONLY

Form **56**
(Rev. July 2004)
Department of the Treasury
Internal Revenue Service

Notice Concerning Fiduciary Relationship

OMB No. 1545-0013

(Internal Revenue Code sections 6036 and 6903)

Part I Identification

Name of person for whom you are acting (as shown on the tax return)	Identifying number	Decedent's social security no. : :
---------------------------------------------------------------------	--------------------	------------------------------------------

Address of person for whom you are acting (number, street, and room or suite no.)

City or town, state, and ZIP code (if a foreign address, see instructions.)

Fiduciary's name

Address of fiduciary (number, street, and room or suite no.)

City or town, state, and ZIP code

Telephone number (optional)
()

Part II Authority

1 Authority for fiduciary relationship. Check applicable box:

- | | |
|-------------------------------------------------------------------------------------|-----------------------------|
| a(1) <input type="checkbox"/> Will and codicils or court order appointing fiduciary | (2) Date of death |
| b(1) <input type="checkbox"/> Court order appointing fiduciary | (2) Date (see instructions) |
| c <input type="checkbox"/> Valid trust instrument and amendments | |
| d <input type="checkbox"/> Other. Describe ▶ | |

Part III Nature of Liability and Tax Notices

- 2 Type of tax (estate, gift, generation-skipping transfer, income, excise, etc.) ▶
- 3 Federal tax form number (706, 1040, 1041, 1120, etc.) ▶
- 4 Year(s) or period(s) (if estate tax, date of death) ▶
- 5 If the fiduciary listed in Part I is the person to whom notices and other written communications should be sent for **all** items described on lines 2, 3, and 4, check here ▶
- 6 If the fiduciary listed in Part I is the person to whom notices and other written communications should be sent for **some** (but not all) of the items described on lines 2, 3, and 4, check here ▶ and list the applicable Federal tax form number and the year(s) or period(s) applicable

Part IV Revocation or Termination of Notice

Section A—Total Revocation or Termination

- 7 Check this box if you are revoking or terminating all prior notices concerning fiduciary relationships on file with the Internal Revenue Service for the same tax matters and years or periods covered by this notice concerning fiduciary relationship ▶
- Reason for termination of fiduciary relationship. Check applicable box:
- a Court order revoking fiduciary authority
- b Certificate of dissolution or termination of a business entity
- c Other. Describe ▶

Section B—Partial Revocation

- 8a Check this box if you are revoking earlier notices concerning fiduciary relationships on file with the Internal Revenue Service for the same tax matters and years or periods covered by this notice concerning fiduciary relationship ▶
- b Specify to whom granted, date, and address, including ZIP code.
▶

Section C—Substitute Fiduciary

- 9 Check this box if a new fiduciary or fiduciaries have been or will be substituted for the revoking or terminating fiduciary and specify the name(s) and address(es), including ZIP code(s), of the new fiduciary(ies) ▶
- ▶

For Paperwork Reduction Act and Privacy Act Notice, see back page.

Cat. No. 163751

Form 56 (Rev. 7-2004)

SAMPLE ONLY

Part V Court and Administrative Proceedings

Name of court (if other than a court proceeding, identify the type of proceeding and name of agency)		Date proceeding initiated		
Address of court		Docket number of proceeding		
City or town, state, and ZIP code	Date	Time	a.m. p.m.	Place of other proceedings

Part VI Signature

I certify that I have the authority to execute this notice concerning fiduciary relationship on behalf of the taxpayer.

Please Sign Here	_____		
	Fiduciary's signature	Title, if applicable	Date

**CHECKLIST FOR CLOSING AN
INFORMAL PROBATE PROCEEDING**

TO CLOSE AN ESTATE	
	Affidavit of Mailing (PR-1817) Showing that a copy of Will/Application/Notice was mailed to all interested persons
	Proof of Publication (obtain from newspaper where the Notice was printed)
	Inventory (with schedules) (PR-1811) Fee Required - .2% of gross assets for estates opened after September 1, 2001. Due 6 months from date Personal Representative is appointed.
	Final Account with schedules (PR-1814)
	Estate Receipt (PR-1815)
	Closing Certificate for Fiduciaries (Obtained from the State of Wisconsin after filing a Fiduciary Tax Return)
	Affidavit of Mailing (PR-1817) Showing that a copy of the Inventory was mailed to all interested persons.
	Affidavit of Mailing (PR-1817) Showing that a copy of the Final Account was mailed to all interested persons.
	Affidavit of Mailing (PR-1817) Showing that IRS Form 56 was mailed to the Internal Revenue Service
	Personal Representative's Statement to Close (PR-1816)

Inventory

Form No. PR-1811 (Rev. 10/01/2003)

Purpose of Form: To identify property and assets owned by the deceased on the date of death that are subject to probate.

Directions:

Page 1:

1. At the top of the form insert the name of the deceased's county of residence.
2. Fill in name of decedent.
3. Check box – informal or formal.
4. Fill in case number.
5. Sign inventory in front of a notary public.
6. Fill in date of death
7. Fill in total value of property/assets subject to administration (from page 2).
8. Fill in total value of encumbrances, liens or other charges (from page 2).
9. Fill in net value of property/assets subject to administration (from page 2).

Page 2:

1. Fill in case number and date of death.
2. Attach supporting schedule (if necessary) – please read the form carefully.
3. List/describe the property subject to administration.
4. List the date of death value.

Other Instructions:

File the Inventory with the Probate Registrar within 6 months of being appointed Personal Representative. A filing fee must accompany the filing of the Inventory – $\frac{2}{10^{\text{th}}}$ of 1% (.2%) of the net value of property/assets subject to administration.

STATE OF WISCONSIN, CIRCUIT COURT, DECEASED'S COUNTY COUNTY

For Official Use

IN THE MATTER OF THE ESTATE OF

DENNY DECEDENT

Inventory

Informal

Formal

SAMPLE

Deceased _____

Case No. 02-IN-9999

As personal representative, I certify to the best of my knowledge that this Inventory with schedules includes:

1. All property subject to administration.
2. A statement of any encumbrance, lien or other charge upon each item.
3. Identification of marital property, if any.

I further certify that I shall furnish a copy of this inventory to all persons interested as required by law.

_____ Signature of Personal Representative Subscribed and sworn to before me on _____ _____ Notary Public/Court Official My commission expires: _____

_____ Signature of Co-personal Representative Subscribed and sworn to before me on _____ _____ Notary Public/Court Official My commission expires: _____

SUMMARY OF PROPERTY (Value of Decedent's Interest at date of Death)	Date of Death August 1, 2001
--------------------------------------------------------------------------------------	---------------------------------

PROPERTY SUBJECT TO ADMINISTRATION

Total value of property Subject to Administration \$ 600,550.00

Minus total value of encumbrances, liens or other charges upon each item (\$ _____)

Net Value of Property Subject to Administration \$ 600,550.00

On attached schedules indicate marital property with an *.

Note: A statutory filing fee shall accompany this form.

Name of Attorney	
Address	
Telephone Number	Bar Number

Number	Supporting Inventory Schedules (Description of property, legal description of real estate, related encumbrances, liens or other charges upon each item. Indicate marital property with an *.)	Value of Decedent's Interest at Date of Death on: August 1, 2001
1	House located at 123 Street, Someplace, WI 5555 (attach/include legal description)	\$ 220,000.00
2	CD #22674 at Northwest Savings Bank Accrued Interest	25,500.00 500.00
3	Savings Account #111222 at Northwest Savings Bank Accrued Interest	20,100.00 450.00
4	Checking Account #33398 at Northwest Savings Bank	10,000.00
5	Ebay Stock – 1,000 shares @ \$50/share	50,000.00
6	Invest Account at Unnamed Stock Company (attach list of investments and date of death value)	274,000.00
	TOTAL	\$ 600,550.00

Final Account

Form No. PR-1814 (Rev. 12/01/04)

Purpose of the Form: To make a written accounting of the assets handled by the Personal Representative during the probate of an estate.

Directions:

Page 1 (a summary of the total figures from schedules which are attached)

1. At the top of the form, fill in the name of deceased's county of residence.
2. Insert the name of the decedent.
3. Under the heading of the form, place a check in the box for "informal" probate.
4. Fill in the case number.
5. Fill in the date of death of the decedent and the date on which you are completing the form.
6. Under "Receipts":
 - a) Inventoried Assets: Insert the figure from the Inventory on file;
 - b) Schedule A – Added Property: List the total of any property found after filing the inventory other than dividends, interest or capital gains; an additional filing fee may be required.
 - c) Schedule B – Dividends: List the total of any dividends received after filing the inventory;
 - d) Schedule C – Interest: List the total of any interest received after filing the inventory;
 - e) Schedule D – Capital Gains/Losses: List the total of any capital gains or losses;
 - f) Schedule E – Other Receipts: List the total of any other property received and not accounted for in Schedules A-D;
 - g) Balancing Totals: Add all the amounts in the "values" column regarding receipts and enter it in the "balancing totals".
7. Under "Disbursements":
 - a) Schedule F – Funeral Expenses: List the total of the funeral expenses;
 - b) Schedule G – Debts of Deceased: List the total of all debts paid.
 - c) Schedule H – Claims: List the total of any claims paid.
 - d) Schedule I – Taxes Paid: List the total of any taxes paid.
 - e) Schedule J – Interest Paid: List the total of any interest paid.
 - f) Schedule K – Administration Expenses: List the total of all administrative expenses paid.
 - g) Schedule L – Other payments: List the total of all other bills paid other than attorney fees.
 - h) Schedule M – Distributions Paid to Date: List the total of all partial payments made to the heirs to the date of preparing this Final Account.
 - i) Total Disbursements: Add all the amounts in the "values" column regarding disbursements (Schedules F-M) and enter the total.
 - j) Schedule N – Assets on Hand: Subtract the total disbursements from the total receipts.

k) Balancing Totals: Add the total disbursements and the total assets on hand and enter that total as the "balancing total" for the disbursements. Assets on Hand (Schedule N):

Insert the same figure as shown above.

8. Insert the amount of any attorney fees, personal representative fees or guardian ad litem fees (if none, so state) and extend the total of these three items.
9. Schedule O - Balance Available for Distribution: Subtract the total of the three fees listed above from the total amount of assets on hand.
10. Schedule P – Proposed Distribution: List the name of each person who is to receive part of the balance available for distribution and the amount they will receive.
11. The Personal Representative or Co-Personal Representatives must sign this document in front of a Notary Public.

Page 2:

12. Insert the case number.
13. Insert the names of the interested persons, their relationship to the deceased, their address and, if a minor, their date of birth.

Page 3:

14. Insert the case number.
15. List Schedules A-P: List in detail the amounts for each schedule, for example:

Schedule F – Funeral Expenses:	
Monument	\$1,000
Funeral	<u>5,680</u>
Total	\$6,680

This total is then inserted on page 1 of the Final Account in the Disbursements column.

The original of this form is filed with the Probate Registrar.

STATE OF WISCONSIN, CIRCUIT COURT, DECEASED'S COUNTY COUNTY

For Official Use

IN THE MATTER OF THE ESTATE OF

DENNY DECEDENT

Deceased

Final Account

Informal

Formal

SAMPLE

Case No. 02-IN-9999

I, the personal representative of this estate, certify that this Final Account is true and correct. The following is my account of the administration of this estate from August 1, 2001 to May 20, 2002.
(Date of Death or Date of Prior Account) (Date)

List interested persons on page 2.

RECEIPTS	VALUES	DISBURSEMENTS	VALUES
Inventoried Assets	\$ 600,550.00	Funeral Expenses (Schedule F)	\$ 6,780.00
Added Property (Schedule A)	-0-	Debts of Decedent (G)	1,450.00
Dividends (B)	600.00	Claims(including those by judgment) (H)	-0-
Interest (C)	440.00	Taxes Paid (I)	5,100.00
Capital Gains (Losses) (D)	(12,245.00)	Interest Paid (J)	-0-
Other Receipts (E)	-0-	Administration Expenses (K)	701.00
		Other Payments (L)	455.00
		Distributions Paid to Date (M)	400,000.00
		TOTAL DISBURSEMENTS	\$ 414,486.00
		Assets on Hand (N)	\$ 174,859.00
BALANCING TOTALS	\$ 589,345.00		\$ 589,345.00

Assets on Hand (Schedule N) \$ 174,859.00
 Minus Requested Fees:
 Attorney \$ -0-
 Personal Representative \$ Waived
 Guardian Ad Litem \$ None (\$ -0-)

Balance Available for Distribution.
Specific assets must be listed in Schedule O. \$ 174,859.00

List of proposed distribution (Schedule P)

_____ Signature of Personal Representative		_____ Signature of Co-personal Representative	
Subscribed and sworn to before me on _____ _____ Notary Public/Court Official My commission expires: _____		Subscribed and sworn to before me on _____ _____ Notary Public/Court Official My commission expires: _____	
Name of Attorney		Telephone Number	Bar Number
Address			

Final Account Supporting Schedule**List of Interested Persons**

The names and addresses of all interested persons are:

(Include any minor(s) with date of birth, incompetent(s), guardian(s) of estate, guardian ad litem or attorney for a person in the military and note if any person is in the military):

<u>Name</u>	<u>Relationship</u>	<u>Address</u>	<u>D. O. B. if Minor</u>
Mary Smith	Daughter	555 Blank Street Sometown, WI 51111	(Adult)
John Decedent	Son	888 Circle Drive Nowhere, IL 64444	(Adult)

Schedule Alpha (A - P)	Final Account Supporting Schedules (List details of each schedule)	Total Values
A	None	-0-
B	Ebay Stock	600.00
C	Interest on CD	220.00
	Interest on Savings	220.00
D	Loss of Sale of Home	(12,245.00)
E	None	-0-
F	Sunset Monuments	1,100.00
	John's Funeral Home	5,680.00
G	Master Card	500.00
	Sears Visa Card	950.00
H	None	-0-
I	County Treasurer	4,500.00
	City of Someplace	600.00
J	None	-0-
K	Inventory Filing Fee	601.00
	Newspaper Publication Fee	100.00
L	Water and Sewer	375.00
	Utilities	80.00
M	Partial Payment - Mary Smith	200,000.00
	Partial Payment - John Decedent	200,000.00
N	Cash or its equivalent at Bank	174,859.00
O	Cash or its equivalent at Bank	174,859.00
P	Distribution:	
	Mary Smith (1/2)	87,429.50
	John Decedent (1/2)	87,429.50

Estate Receipt

Form No. PR-1815 (Rev. 7/06/2001)

Purpose of Form: To show that creditors, heirs, beneficiaries or Trustee have received what is due them from the decedent's estate.

Directions:

1. At the top of the form insert the name deceased's county of residence.
2. Insert the name of the decedent.
3. Place a check in the box to indicate "informal" probate.
4. In No. 1, describe the property covered by the issuance of the receipt. (Cash payment, items of personal property, interest in real estate, etc.)
5. Place a check in the appropriate box No. 2a through 5.
6. If the receipt is for a claim against the estate, place a check in No. 3.
7. Recipient signs the receipt, adding their address and the date signed.

The original of this form is filed with the Probate Registrar

*Note: A receipt is required for all distributions in an estate.

STATE OF WISCONSIN, CIRCUIT COURT, DECEASED'S COUNTY COUNTY

For Official Use

IN THE MATTER OF THE ESTATE OF

Estate Receipt

- Informal
- Formal

SAMPLE

DENNY DECEDENT

Deceased

Case No. 02-IN-9999

1. I have received from the personal representative special administrator of this estate the following:

Partial Distribution	\$200,000.00
Final Distribution	87,429.50
 Total	 \$287,429.50

This is:

- 2a. A partial payment of my share of the estate.
- 2b. Full payment of my share of the estate.
- 3. Full satisfaction of my claim.
- 4. Distribution of funds to trust _____
(Identify Trust)
- 5. Other: _____

Signature

John Decedent
Name Printed or Typed

888 Circle Drive, Nowhere, IL 64444
Address

Date

Name of Attorney	
Address	
Telephone Number	Bar Number

Affidavit of Mailing

Form No. PR-1817 (Rev. 10/20/2000)

Purpose of Form: A sworn statement indicating the names and address of all interested persons to whom various documents are mailed.

Directions:

1. At the top of the form indicate the name of deceased's county.
2. Below the phrase "In the Matter of", insert the name of the deceased. Insert the case number in the required space.
3. When you complete this form, you are swearing that you mailed a copy of a specific document or documents to certain parties concerned with the estate.
4. Please insert your name where indicated and the city where you live.
5. Insert the mailing date next.
6. After the words "a copy of", insert the name of the document or documents that you have mailed.
7. Place a "x" in the box to indicate whether the original of that document(s) is already in the estate file in the Register's Office or if a copy of that document(s) is attached to this affidavit.
8. Insert the names and addresses of all the individuals to whom you have mailed a copy of the document you inserted earlier in this form.

DO NOT SIGN THIS FORM until you are in front of a Notary Public. The Probate Registrar may also witness your signature.

STATE OF WISCONSIN, CIRCUIT COURT, DECEASED'S COUNTY COUNTY

For Official Use

IN THE MATTER OF

**Affidavit of Mailing
(Probate/Guardianship)**

DENNY DECEDENT

Deceased

Case No. 02-IN-9999

I, MARY SMITH of SOME TOWN,

Name

City

Wisconsin, being sworn, state that on "DATE OF MAILING", I mailed properly

Date

enclosed in a postpaid envelope, a copy of: NAME OF DOCUMENT/FORM

- the original of which is on file
- a copy of which is attached

addressed to each of the following named persons, at the address listed: See attached.

NAME

ADDRESS

John Decedent

888 Circle Drive, Nowhere, IL 61111

Subscribed and sworn to before me

on _____

Notary Public/Court Official

My commission expires: _____

Name

Mary Smith

Address

Insert date signed

Name of Attorney
Address
Telephone Number

Personal Representative's Statement to Close Estate

Form No. PR-1816 (Rev. 5/01/2002)

Purpose of Form: To verify that the Personal Representative has completed the estate.

Directions:

1. At the top of the form, insert the name of deceased's county of residence.
2. Insert deceased's name.
3. Insert the case number.
4. Read paragraphs 1-4 and determine if you have completed all tasks.
5. In No. 5, insert the amount of any attorney fees paid.
6. Read paragraph 6 and answer appropriately.
7. The Personal Representative must sign the Statement in front of a Notary Public.

The original of this document is filed with the Probate Registrar

STATE OF WISCONSIN, CIRCUIT COURT, DECEASED'S COUNTY COUNTY

For Official Use

IN THE MATTER OF THE ESTATE OF

**Personal Representative's
Statement to Close Estate
(Informal Administration)**

SAMPLE

DENNY DECEDENT

Deceased

Case No. 02-IN-9999

I state that I, or a prior personal representative whom I have succeeded, have:

1. Given notice to interested persons and to creditors as required by law and that the time for filing claims has expired prior to the date of this statement.
2. Inventoried the assets of the estate and furnished a copy of the inventory to interested persons.
3. Fully administered the above estate by making payment, settlement, or other disposition of all claims presented, expenses of administration, reasonable funeral and burial expenses, death and other taxes, except as specified below, and furnished a full account, in writing to all persons whose interests are affected.
4. Sent a copy of this statement to all distributees of this estate and to all creditors or other claimants of whom I am aware, whose claims are neither paid nor barred, and distributed the assets to the persons entitled to them.
5. Paid attorney fees of \$ 0.00.
6. Listed below, unpaid claims, expenses or taxes and detailed arrangements which have been made to accommodate them: None See attached.

Signature of Personal Representative	Signature of Co-personal Representative
Name Printed or Typed Mary Smith	Name Printed or Typed
Address 555 Blank Street Sometown, WI 51111	Address
Subscribed and sworn to before me on _____ _____ Notary Public/Court Official My commission expires: _____	Subscribed and sworn to before me on _____ _____ Notary Public/Court Official My commission expires: _____

If no other proceedings challenging this statement or otherwise involving the personal representative are pending in the court 6 months after this statement is filed, appointment of the personal representative terminates.

Name of Attorney	
Address	
Telephone Number	Bar Number

Declination to Act as Personal Representative

Form No. PR-1802 (Rev. 12/01/2004)

Purpose of the form: To allow the person who has been nominated in the Will as personal representative or executor to decline to act as such personal representative or executor.

Directions:

1. At the top of the form insert the name of deceased's county of residence.
2. Insert the name of the decedent.
3. Check the box for informal probate.
4. Leave the case number blank.
5. In No. 1, check the appropriate box or boxes that apply.
6. The person who is declining to act must sign and date this form where indicated.

Original of this form is filed with the Probate Registrar.

STATE OF WISCONSIN, CIRCUIT COURT, DECEASED'S COUNTY COUNTY

For Official Use

IN THE MATTER OF THE ESTATE OF

Declination to Act

SAMPLE

DENNY DECEDENT

Informal
 Formal

Deceased

Case No. _____

1. I have been nominated as personal representative. testamentary trustee.
2. I have not undertaken any duties in this capacity.
3. I decline to serve in this capacity.

Signature

John Decedent

Name Printed or Typed

Date

Name of Attorney	
Address	
Telephone Number	Bar Number

Order Appointing Guardian ad Litem or Counsel

Form No. GF-131 (Rev. 4/21/05)

Purpose of the Form: Appoints either counsel or guardian ad litem for an individual.

Directions:

1. At the top of the form insert the deceased's county of residence.
2. Below the phrase "Case Caption", insert "In the Matter of the Estate of" and the decedent's name.
3. Leave the case number blank.
2. Place an "x" in the appropriate box for either a guardian ad litem or an attorney. The Probate Registrar will tell you which one is required.
3. Insert the name, address and telephone number of the individual for whom a guardian ad litem or attorney will be appointed.
4. Place a check in the appropriate box to identify why the individual requires a guardian ad litem or attorney appointed for them.
5. If applicable, type in name and address of attorney requesting the appointment of a Guardian ad Litem.
6. The Probate Registrar will appoint a Guardian ad Litem and complete the remainder of the form.

STATE OF WISCONSIN, CIRCUIT COURT, DECEASED'S COUNTY COUNTY

For Official Use

Case Caption:

Order Appointing
Guardian ad Litem or Counsel

SAMPLE

IN THE MATTER OF THE ESTATE OF:

DENNY DECEDENT, Deceased

Case No. 02-IN-9999

A matter is pending in this court which requires the appointment of a(n)

- guardian ad litem
- attorney

because:

Name: Type Name of Person Needing a Guardian ad Litem

Address: Type Address

Telephone Number: Type phone number

is

- a minor involved in a(n):
 - family court matter
 - estate proceeding
 - juvenile court proceedings (CHIPS, JIPS, Delinquency, or TPR)
- an alleged incompetent
- an incompetent who is involved in this proceeding
- in military service
- person(s) unknown
- subject of a chapter 51 proceeding
- other: _____

THE COURT ORDERS the appointment of:

Name: _____

Address: _____

Telephone Number: _____

Consent to Act must be signed below.

BY THE COURT

Signature of Court Official

Name Printed or Typed

Date

I consent to my appointment as guardian ad litem.
 attorney.

Signature

Date

Name of Attorney requesting GAL
Type in name/address if applicable
Address
Telephone

Signature Bond

Form No. PR-1809 (Rev. 10/20/2000)

Purpose of Form: Guarantees compliance with the terms of the bond, and is the proposed personal representative's promise to faithfully perform his duties in the administration of the estate.

Directions:

1. At the top of the form, insert the name of deceased's county of residence
2. Insert the name of the decedent.
3. Insert the case number if one has already been assigned.
4. Principal and Surety can be either the same individual or separate individuals. The Principal is the personal representative. The surety is the individual willing to be personally liable to the estate should there be a loss of assets as a result of wrongdoing or mismanagement.
5. Insert the amount of bond as determined by the Probate Registrar (based on the estimated value of the estate).
6. Place a check in the appropriate box.
7. The Principal must sign where indicated and the signature of a witness to the signing is also required.
8. Any Surety must also sign where indicated and that signature must be in front of a Notary Public.
9. If the bond is approved, the Probate Registrar will complete the remainder of the form.

The original is filed with the Probate Registrar.

STATE OF WISCONSIN, CIRCUIT COURT, DECEASED'S COUNTY COUNTY

For Official Use

IN THE MATTER OF

Signature Bond

SAMPLE

Denny Decedent

Deceased

Case No. 02-IN-9999

I/we _____, principal(s)
Name(s)

and _____, surety(ies)
Name(s)

are held and firmly bound to the Circuit Court in the sum of \$_____ for which payment we bind ourselves and our heirs, personal representatives or successors, jointly and severally.

If the principal faithfully performs duties as:

- personal representative; guardian; testamentary trustee; special administrator;
- petitioner in summary settlement/assignment;
- assignee in summary assignment, to satisfy liability to creditors or other persons interested in the estate;
- other: _____

then this bond obligation shall be void; otherwise it shall remain in full force and effect.

Witnessed By:

_____ Signature	_____ Signature of Principal (Seal)
_____ Signature	_____ Signature of Principal (Seal)

I, being sworn as a surety, state that I am an adult resident of Wisconsin, residing in _____ County. I am financially responsible for the actions of the principal(s) in the amount of this bond. I shall provide satisfactory evidence to the designated court officer.

Subscribed and sworn to before me

on _____

Signature of Surety

Address

Notary Public/Court Official

Signature of Surety

My commission expires: _____

Address

Satisfactory evidence as to financial responsibility of surety has been reviewed by the designated court officer.

APPROVED BY:

Court Official

Name Printed or Typed

Date Bond Approved

Designated Court Officer

Name of Attorney	Telephone Number
Address	

Letters of Trust:
(Issued under Informal Administration)

Form No. PR-1829 (Rev. 10/20/2000)

Purpose of Form: Written authority of a Trustee as outlined in a Will to act on behalf of a testamentary trust in an estate.

Directions:

1. At the top of the form, insert deceased's county of residence.
2. Under the words "IN THE MATTER OF THE ESTATE OF" fill in the name of the decedent.
3. Below the words "For the following trust" fill in the name of the trust or the name of the person who will benefit from this trust.
4. Fill in the case number.
5. Fill in the section after "To:" with the name and address of the Trustee.
6. Insert the deceased's date of birth, date of death, county and state.
7. The Probate Registrar will sign the Letters and complete the signature area.
7. In the lower left-hand corner of the form fill in the name, address and telephone number of the Trustee.

Certified copies of the Trust Letters are available for a fee from the office of the Probate Registrar.

Please note: Pursuant to state statute, Letters of Trust must be issued at the same time that Domiciliary Letters are issued.

STATE OF WISCONSIN, CIRCUIT COURT, DECEASED'S COUNTY COUNTY

For Official Use

IN THE MATTER OF THE ESTATE OF

Letters of Trust
(Issued under Informal
Administration)

S A M P L E

DENNY DECEDENT

For the following trust:

Insert name of Trust Beneficiary

Case No. 02-IN-9999

To: MARY SMITH
555 Blank Street
Sometown, WI 51111

The decedent, whose date of birth was December 11, 1910 and date of death was August 1, 2001,
died domiciled in Deceased's County County, State of Wisconsin.

The decedent's Will has been admitted to probate. Based upon your appointment and qualification to act as trustee, you are granted Letters of Trust with the general powers and duties of trustee. You are authorized to administer the trust as required by law.

LETTERS ISSUED BY

Seal

Probate Registrar

Name Printed or Typed

Date

Name of Attorney/Personal Representative Mary Smith
Address 555 Blank Street Sometown, WI 51111
Telephone Number (715) 999-9999

Demand for Formal Proceedings (Informal Administration)

Form No. PR-1813 (Rev. 6/01/2000)

Purpose of Form: To initiate formal proceedings as to a particular issue or the entire subsequent administration of informal estate proceedings.

Directions:

Sometimes during the administration of an "informal estate" it becomes necessary for a judge to make a determination about a specific issue. This form is used to transfer from informal proceedings to formal proceedings so that a judge can hear the matter.

At the top of the form, insert the name of deceased's county of residence and the name of the deceased below the phrase "In the Matter of the Estate of". Insert the case number.

1. At the top of the form insert the name of deceased's county of residence.
2. Insert the name of the deceased below the phrase "In the Matter of the Estate of..."
3. Insert the case number.
4. Place a check mark in the appropriate box to indicate whether you are the personal representative for the estate or an interested person.
5. Check the appropriate box to indicate whether you are asking the court to determine a particular issue or if you wish for the court to administer all the remaining proceedings for this estate.
6. If you are requesting the court to determine a particular issue, provide a complete explanation of your demand and specify the action you are requesting of the court.

Sign and date the form at the bottom.

The original of this document is filed with the Register in Probate.

A copy of this Demand must be provided to the Personal Representative who in turn provides a copy to all the interested persons.

Please read the Demand carefully regarding suspension of powers of the Personal Representative.

STATE OF WISCONSIN, CIRCUIT COURT, DECEASED'S COUNTY COUNTY

For Official Use

IN THE MATTER OF THE ESTATE OF

**Demand for
Formal Proceedings
(Informal Administration)**

S A M P L E

NAME OF DECEASED _____

Case No. 02-IN-9999

1. I am

- the personal representative in the above estate.
- an interested person in the above estate.

2. I demand formal proceedings as to:

- the entire subsequent administration of the estate.
- a particular issue. Explain:

This document shall be served on the personal representative, if any, and filed with the court.

Service and filing of this document:

- suspends the informal administration as to the matters listed above, and
- suspends the powers of the personal representative as to these matters until reinstated by the court.

Signature of Personal Representative/Interested Person

Name Printed or Typed

Date

Name of Attorney
Address
Telephone Number