A Personal Representative's GUIDE

TO

INFORMAL ESTATE ADMINISTRATION

IN WISCONSIN

Developed by the
Wisconsin Register in Probate Association
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Additional information is available on the Internet at:
http://wripa.org
http://wicourts.gov/services/public/selfhelp/probate.htm
http://wilawlibrary.gov/topics/estate/probate.php

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FREQUENTLY ASKED QUESTIONS

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 estate administration process.

We suggest that you review the terms under “Definitions” on page 10 before reading on.

WHAT TYPES OF ESTATE ADMINISTRATIONS ARE THERE?

Formal and Informal Administration

There are several types of estate administrations that may be supervised by the probate court. Two of these, *Formal Administration* and *Informal Administration* require the appointment by the court of a personal representative (formerly known as an "executor"). **A *Formal Administration* requires the assistance of an attorney.** *Informal Administration* may be granted without an attorney's assistance.

Summary Settlement

Summary Settlement is a type of estate administration designed to assist in settlement of small estates and does not require an attorney's assistance. *Summary Settlement* is available for estates having a value of $50,000 or less, if the decedent had a surviving spouse/domestic partner or had surviving minor children.

Summary Settlement is also available if the value of the estate does not exceed certain costs, expenses, allowances and claims, regardless of whether there is a surviving spouse/domestic partner or minor children. The value of the estate is calculated by subtracting from the gross amount of assets any debts for which property of the estate is security.

Summary Assignment

Summary Assignment is a type of estate administration for estates of $50,000 or less and was designed to assist in settlement of small estates that cannot be settled by a *Summary Settlement*. It does not require the assistance of an attorney.

IT MAY BE APPROPRIATE FOR YOU TO CONSULT WITH AN ATTORNEY BEFORE ATTEMPTING ANY OF THE FOREGOING TYPES OF ESTATE ADMINISTRATION.

Transfers of Property without Estate Administration

There is a method to transfer a decedent’s assets without a court supervised administration, called *"Transfer by Affidavit",* for estates having a value of $50,000 or less. The person who completes and uses this form has certain legal responsibilities and it may be appropriate to consult with an attorney before deciding whether you should use a "*Transfer by Affidavit*" form.

WHEN IS INFORMAL ESTATE ADMINISTRATION NOT ALLOWED?

If there is a Will that prohibits informal administration, then formal administration will be required. If there is no Will (or a Will exists but the nominated personal representatives do not accept the appointment) and all the persons interested do not request or consent in writing to informal administration and appointment of the same person as personal representative, then formal administration will be required. If an interested person demands formal administration for the entire administration of the estate, then formal administration will be required.

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

The choice of estate administration is a legal decision and we cannot provide this advice to you. Decisions about which estate administration procedure would be most appropriate are often affected by the presence or absence of interested persons who do not agree on what should be done, tax issues, the size of the estate, claims, and the need to have a judge determine or decide issues such as disputed claims, the validity of a will, the meaning of the terms of a will, or who are the heirs.

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 estate administration must be done “intestate” (without a Will). If the decedent has not advised you where his or her 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 decedent’s home or wherever the decedent kept his or her other important papers; some Office’s of Register in Probate keep original Wills on deposit for “safekeeping”; or maybe the original is in the office of the attorney who drafted it. Note that there may also be an original Codicil or Codicils that modify the Will.

Next, make a list of the heirs under the statutes (see Intestate Succession Chart on page 12). Then, if there is a Will (including any Codicils), make a list of the beneficiaries (those named in the Will and Codicils).

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 estate administration 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 an attorney.

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

DO I NEED AN ATTORNEY FOR INFORMAL ESTATE ADMINISTRATION?

While Wisconsin statutes do not require you to hire an attorney to assist with an informal estate administration, you may seek the advice or services of an attorney at any point during the process. Also, at any time during the estate administration 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 advise a personal representative, within the Registrar’s competence, in the preparation of any of the documents required to be filed with the court in an informal estate administration. Think of this as giving advice as to how the various forms should be completed, not giving advice as to how you should proceed in any area. This booklet is an attempt to assist the Registrar in giving a personal representative the required document preparation advice.

HOW DO I START AN INFORMAL ESTATE ADMINISTRATION?

The following startup forms are always required:

- **Application for Informal Administration** (PR-1801)
- **Proof of Heirship** (PR-1806)
- **Consent to Serve** (PR-1807)
  (signed by nominated personal representative and may include Appointment/Acceptance of Resident Agent)
- **Statement of Informal Administration** (PR-1808)
- **Domiciliary Letters** (PR-1810)

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

- **Waiver and Consent (Informal Administration)** (PR-1803)
- **Notice to Creditors** (PR-1804)

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

- **Notice Setting Time to Hear Application and Deadline for Filing Claims (Informal Administration)** (PR-1805)

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

- **Signature Bond in Estate or Trust Proceedings** (PR-1809)
  (or a Surety Bond that is obtained from an insurance agent)
- **Affidavit of Service (Probate)** (PR-1817)
- **Consent to Serve as Trustee** PR-1930)
  (signed by nominated trustee – may include Appointment/Acceptance of Resident Agent)
- **Letters of Trust (Informal and Formal Administration)** (PR-1931)
- **Declination to Serve or Resignation (Informal and Formal Administration)** (PR-1802)
- **Order Appointing Guardian Ad Litem or Attorney** (GF-131)
- **Petition to Dispense with Guardian ad Litem (Informal and Formal Administration)**
  (PR-1820)
- **Order Dispensing with Guardian ad Litem (Informal and Formal Administration)**
  (PR-1821)
- **Probate Claims Notice** (#HCF-13033)

You are now ready to apply for informal estate administration. 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 original Will/Codicil/Marital Property Agreement, if any.)

HOW DO I COMPLETE THE INFORMAL ESTATE ADMINISTRATION?

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

- **Affidavit or Proof of Publication**
- **Inventory (Informal and Formal Administration)** (PR-1811)
  (including the required filing fee)
- **Affidavit of Service (Probate)** (PR-1817)
  (of Inventory to Heirs/Beneficiaries)

- **Estate Receipt (Informal and Formal Administration)** (PR-1815)
  (from Heirs/beneficiaries and claimants)
- **Statement of Personal Representative to Close Estate (Informal Administration)** (PR-1816)

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

- **Estate Account (Informal and Formal Administration)** (PR-1814)
- **Affidavit of Service (Probate)** (PR-1817)
  (of final Estate Account to Heirs/Beneficiaries)
- **Notice of Distribution to Ward (Informal and Formal Administration)** (PR-1822)
  (To notify the court appointing a guardian of the estate of the total property to be distributed to the guardian of the estate for the benefit of the guardian's ward at least ten days prior to the distribution.)
- **Closing Certificate for Fiduciaries**
  (obtained by filing a Schedule CC form with the Wisconsin Department of Revenue)
- **Receipt for Perpetual Care or Funeral Receipt**
- **Proof of Recording of Documents Transferring Real Estate**
- **Statement of Transfer of Interest in Property (Informal Administration)** (PR-1828)
- **Statement of Termination and Confirmation of Interest(s) in Property (Informal Administration)** (PR-1827)

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 Setting Time to Hear Application and Deadline for Filing Claims (Informal Administration) 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 Office of Register in Probate to sign the form, you can usually find a notary public at your bank. If you live in another state, you may use a local notary.

As you gather the decedent's assets in preparation for filing the Inventory form, think of the Inventory as a snapshot of the **fair market value** of all assets owned by the decedent on the date of death. Remember that the Inventory must be filed no later than 6 months after the appointment of the personal representative. You may be instructed to file the Inventory sooner, depending on local practice. Provide a copy of the Inventory to all interested persons. **The Inventory is an important legal document that establishes the fair market value of assets on date of death and incorrect valuations can have a significant impact on the personal representative and distributees of the assets listed in the Inventory. Income tax basis problems and disputes about proportionate distribution of assets are examples of issues that may arise from improper valuation. Although you are not required to hire a qualified and disinterested appraiser to assist you in determining the value of assets, you should consider whether you have sufficient skills to appraise inventoried assets on your own. You may also wish to consult with a tax advisor or attorney before filing your Inventory.**

If there are any claims filed against the estate, the law requires that the claims be “allowed or disallowed according to ch. 859.” If a claim is satisfied by you, the creditor must provide a “Receipt” acknowledging complete satisfaction or settlement of the claim. If you dispute the claim, you will be required to demand “formal administration” to have a judge decide the dispute. You must be represented by an attorney in proceedings before a judge. For this reason it is wise to seek the assistance of an attorney as soon as you determine that a claim should be disallowed. If a claim has been served on you or mailed to you, your objection, offset or counterclaim must be served upon or mailed to the claimant and filed with the court within 60 days of when the claim was mailed to or served upon you as personal representative.

If you will be selling or transferring an interest in real estate, you will be required to sign a deed or transfer document with the proper **legal description** (not a postal address). You may wish to have an attorney prepare this important legal document, as mistakes in the **legal description** can affect ownership interest in the property.

You should prepare a final Estate Account and furnish copies to all heirs/beneficiaries. Think of the final Estate Account as a record 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 passed and should be closed within 12 months of the date the estate was opened or by the date set in the Notice of Estate Administration Deadlines, unless an extension is granted by the Probate Registrar.

The Statement of Personal Representative 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.

Should you need to review statute books, check your public library, the Wisconsin State Law Library (**http://wilawlibrary.gov/**) or the law library at your local courthouse. Statutes are viewable online at: **http://legis.wisconsin.gov/rsb/stats.html.**

Within the scope that has been discussed earlier in this booklet, your local Probate Registrar is here to see you through the informal estate administration process. We hope this booklet is helpful and we welcome your comments on ways that we may improve it to 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 <u>before</u> 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 statutory fee, the Probate Registrar will supply you as many certified copies of this document as you feel you will need at any time throughout the estate administration process.

Serving as personal representative is a VERY important job. You may be required to post a bond to protect the assets in the estate. You must keep all interested persons informed of the status of the estate

proceedings and complete the estate in a timely fashion. The Probate Registrar will send you a Notice of Estate Administration Deadlines showing the inventory due date and the date by which the estate is to be closed.

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 his or her 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 may need to open a checking account. We cannot order that a checking account be opened, nor is it always needed. However, with a checking account 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 must file a closing certificate for fiduciaries obtained from the Department of Revenue. You may petition the court for waiver of this filing. Consult with your local Registrar about this requirement. 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 must prepare a final Estate Account, 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 may be required to file it with the Probate Registrar. To prepare an Estate Account, you must keep accurate records. There are many ways to keep records. An inexpensive method is to prepare a ring binder or spiral notebook for “scheduling” your financial activities, such as receiving assets, paying bills or making distributions. A sample “scheduling” page can be found on page 72 of this booklet. If you make entries in your notebook or ring binder as these activities occur, there is less chance that you will make mistakes in your accounting and it will take less time to complete your Estate Account. It will also be easier for someone to help you complete your accounting if you have kept accurate records.

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

Finally, you will file a Statement of Personal Representative to Close Estate. Six months after the filing of this Statement, your duties are complete.

IMPORTANT NOTE ON TAX LIABILITY: As personal representative, you are responsible for paying any taxes that are owed by the estate or the decedent, from the estate assets. These include the decedent’s gift and income taxes, as well as the income and estate taxes owed by the estate. You may incur personal liability for these taxes if they are owed and not paid from available estate assets. You should consult with an attorney or tax advisor about these issues if you have questions about potential tax liabilities of the decedent or the estate. You should investigate whether all potential taxes owed by the decedent were paid. A starting point would be for you or your advisor to review prior tax returns of the decedent, as well as any actions of the decedent that could give rise to income or gift tax liability.

WHAT FORMS WILL I NEED TO COMPLETE?

On the following pages you will find samples of the "usual" informal administration 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 booklet. 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. Most computers will have the necessary word processing software to complete the forms online. The forms are available in a PDF format, as well, and a PDF reader can be downloaded from this site.

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

Administration: A court-supervised process to: 1) give notice to creditors and *interested persons*; 2) determine who the *heirs* are, 3) collect and inventory assets; 4) determine and pay federal and state taxes; 5) pay claims and administration expenses; 6) transfer assets of a decedent to heirs or to beneficiaries under a *Will* or *Codicil*; and 7) account for the disposition of assets that are collected.

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

Bequest and Devise: Used in a *Will* or *Codicil* to grant an interest in property.

Codicil: A written document made by the deceased changing an existing *Will*. In Wisconsin a *Codicil* and a *Will*, to be validly executed, must be executed with the signature of two witnesses and the signature of the testator or someone under his or her direction.

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

Domicile: Is the place where a person has his or her fixed and permanent home or residence to which he or she intends to return after any absence. It is not a special or temporary residence but a home or residence intended to be permanent for an unlimited or indefinite period.

Fair Market Value: A property's full value is defined as its fair market value, or the amount the property will sell for in an arms-length transaction on the open market between a willing seller not obliged to sell the property and a willing buyer not obliged to purchase it.

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

Interested Person or Person Interested: Includes one or more of the following: 1) any *heir* of the deceased (even if not named in the *Will or Codicil*); 2) any beneficiary named in the *Will* or *Codicil*, and may include a beneficiary of a *trust*, the *trustee* of any existing *trust*, and a nominated *trustee* in the *Will* or *Codicil*; 3) the Personal Representative named in the *Will*.

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

Issue: "*Issue*" are children, grandchildren, great-grandchildren, and lineal descendants of more remote degrees, including those who occupy that relation by reason of adoption (under §854.20, Wis. Stats.) and nonmarital children and their lineal descendants (to the extent provided by Sec. 852.05, Wis. Stats.).

Legal Description: A complete description of land recorded in a document filed with the register of deeds, such as occurs in a deed. Typically, this description is by lot number in a platted and recorded subdivision, or by "metes and bounds". A postal address is not a "*legal description*."

Per Stirpes: Property is divided into equal shares for the decedent's children, one share for each surviving child and one share for each deceased child; the deceased child's share is divided among the surviving *issue* of the deceased child (i.e. by right of representation).

Personal Representative: Any person authorized to administer a decedent's estate. Evidence of this authorization is found in Domiciliary Letters granted by the court or by the Probate Registrar. A personal representative may be nominated in a *Will* or *Codicil*.

Probate: Technically speaking, *probate* is the proof of the validity of a *Will* in court proceedings and the *probate* of the assets of a *decedent* involves the process of administering the assets as directed under the *Will*. However, *probate* or *probate administration* are terms often associated with administration of the property of persons who have died *intestate* (leaving no *Will),* as well as the property of minors, persons determined to be incompetent, and persons unwilling or unable to manage their income or assets.

Probate Registrar: An officer of the court designated to perform the functions of the court in informal estate proceedings.

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, appointed by the court as *trustee* (sometimes a bank), holds and distributes property for the benefit of another.

Trustee: A person who holds in trust the title or power over property.

Will: A document, properly executed prior to death, which directs distribution of property after death and 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. In Wisconsin a *Codicil* and a *Will*, to be validly executed, must be executed with the signature of two witnesses and the signature of the testator or someone under his or her direction.

INTESTATE SUCCESSION CHART
Per §990.001(16), Wis. Stats.

		2
		Grandparents
	1	3
	Parents	Uncles, Aunts
1a	2	4
Surviving Spouse	Brothers Sisters	First Cousins
1b	3	5
Children	Nephews Nieces	First Cousins Once Removed
2	4	6
Grandchildren	Grand Nephews, Nieces	First Cousins Twice Removed
3	5	7
Great Grandchildren	Great-Grand Nephews, Nieces	First Cousins Thrice Removed
Each Succeeding Generation Adds One Degree	Each Succeeding Generation Adds One Degree	Each Succeeding Generation Adds One Degree

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

CHECKLIST FOR OPENING
AN INFORMAL ESTATE ADMINISTRATION

TO OPEN AN ESTATE/RECEIVE DOMICILIARY LETTERS	
	Application for Informal Administration (PR-1801)
	Proof of Heirship (PR-1806)
	Original Will (and Codicils, if any)
	Waiver and Consent (Informal Administration) (PR-1803)
	Consent to Serve (PR-1807)
	Statement of Informal Administration (PR-1808)
	Signature Bond in Estate or Trust Proceedings (PR-1809) OR **Surety Bond** (if required)
	Domiciliary Letters (PR-1810)
	Notice to Creditors (PR-1804) OR
	Notice Setting Time to Hear Application and Deadline for Filing Claims (PR-1805)
	Probate Claims Notice (if required) (#HCF-13033)
	Notice Concerning Fiduciary Relationship (IRS Form 56)
	Declination to Serve or Resignation (if necessary) (PR-1802)
	Order Appointing Guardian ad Litem or Attorney (if required) (GF-131)
	Consent to Serve as Trustee (if necessary) (PR-1930)
	Letters of Trust (if necessary) (PR-1931)

IMPORTANT INFORMATION ABOUT THESE SAMPLE FORMS

These sample forms are completed as if the decedent had a valid Will. This hypothetical Will provides for specific bequests to individuals and an equal sharing (25% each) of remaining (residual) cash assets after the remaining assets are sold and debts, taxes and expenses are paid. The specific bequests in this hypothetical Will are as follows:

- Mary Smith, individually: all (100) shares of GHI Company stock, toy train sets, all household furniture and furnishings, riding lawn tractor, tools, and jewelry.
- Susan Brown, individually: ACME GTS automobile, antique Shaker corner cabinet, all appliances, silver tea set, and silver dollar collection.
- Mary Smith, as Trustee of the Trust for the Benefit of John Miller: all (150) shares of EDF stock, all (311) shares of XYZ Company, all (100) shares of Ltd Foods, Inc. stock, all (100) shares of ACME Corporation.

The hypothetical Will provides for any dividends paid before distribution of the specific bequests to be considered income earned by the estate and that distributions of property shall be at the values listed in the personal representative's Inventory and not current values at time of distributions.

These sample forms are completed as if the personal representative has "waived" her right to collect a fee under Sec. 857.05 of the Wisconsin Statutes. If you will be collecting a personal representative's fee, it is recommended that you seek appropriate legal advice concerning the calculation of a personal representative's fee and the proper method of accounting for the fee on the Estate Account.

If you are administering an estate with a Will, distributions must follow the directions of the Will. It is recommended that you obtain appropriate tax or legal advice if you will be attempting to distribute proportionate shares of non-cash assets.

Application for Informal Administration

Form No.: PR-1801 (Rev. 10/07/2010)

Purpose of Form: To apply to the Court for informal administration of an estate.

Directions:

PAGE 1.

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

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 and state in which he/she was domiciled
   d) post office address

2. You must indicate in what way you are an "interested person" in the estate. Are you an heir, a beneficiary under a Will or Codicil, nominated as a Personal Representative in the Will or Codicil, or a nominated Trustee or trust beneficiary, etc.?

3. Check the appropriate box to indicate whether 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. This amount is not binding on you or anyone else; it is just an estimate.

5. Check the appropriate boxes concerning assistance programs from which the deceased may have received aid. If you are uncertain, check the box to indicate you lack information concerning aid.

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 you are uncertain, check the box to indicate you lack information concerning aid. 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 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 for each party.

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

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

PAGE 2.

8. If you have made a diligent inquiry and are convinced that the deceased person left no Will, then check this box.

9. Insert the name, relationship (what makes the person "interested"), and address of each "interested person". Refer to the "definitions" section regarding who is an "interested person." Make sure that you list the names of all the "interested persons" (whether or not they are actually named in the Will or Codicil). Also include any minors and their dates of birth, and anyone who has been found to be incompetent and the name of his or her Guardian.

   If the Will provides for a Testamentary Trust and Trustee, you must also include the name and address of the Trustee as an interested person and prepare a Consent to Serve (by Trustee) and 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 property from the estate, list the name and address of the Trustee(s) of that trust.

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

On the lines provided, type the name, address and telephone number of the person who is applying to open this proceeding.

Complete the "Form Completed by" box in the lower left corner of the form. This needs to be done on all forms submitted to the court.

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.

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

For Official Use

☐ Amended

IN THE MATTER OF THE ESTATE OF

WILLIAM DECEDENT,

deceased

Application for Informal Administration

Case No.

SAMPLE

UNDER OATH, I STATE:

1. The decedent, with date of birth December 30, 1940 and date of death July 1, 2011, was domiciled in (deceased's county) County, State of Wisconsin, with a mailing address of 51111.
2. I am interested as (an heir)(nominated personal representative/trustee)(beneficiary).
3. Other proceedings concerning the estate of the decedent ☐ are ☒ are not pending in this state or elsewhere. Explain: _____.
4. The estimated net value of decedent's property requiring administration is $200,000.00.
5. The decedent
   - ☐ did ☒ did not receive Medical Assistance/Medicaid.
   - ☐ did ☒ did not receive Family Care and/or Partnership benefits (through a Managed Care Organization – MCO/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: _____

   ☐ I lack information to complete this section.
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.

   ☐ Married to decedent ☐ Divorced from decedent at time of decedent's death.

   The spouse ☐ did ☒ did not receive benefits from the Community Options Program (COP).

   The spouse ☐ did ☒ did not receive benefits from the Wisconsin Chronic Disease Program.

   ☐ I lack information to complete this section.

(Complete question 7 OR 8 below, whichever is applicable.)

☒ 7. The decedent died leaving a

☒ will, dated October 1, 2010. ☐ codicil(s) (If any), dated _____.

I believe these documents were executed properly and are valid. I made diligent inquiry and am unaware of any revocation by decedent.

The original will, including any codicil(s),

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

The personal representative(s) named by the decedent in the will and/or any codicil is:

Name(s) Mary Smith

I nominate Mary Smith to serve as personal representative(s).

The trustee(s) named by the decedent in the will and/or codicil is:
Name(s) Mary Smith
I nominate Mary Smith to serve as trustee(s).

☐ 8. I made diligent inquiry and am unaware of any unrevoked will of the decedent and believe that the decedent died leaving no will.
I nominate _____ to serve as personal representative(s).

9. The names and mailing addresses of all interested persons are:
(For any person with disabilities, also list any guardian of estate; for any person in the military, also list attorney or attorney in fact; and for any minor, list date of birth.)
☐ **See attached**

Name	Relationship (e.g. Heir, Beneficiary, Fiduciary)	Mailing Address	If Minor, Date of Birth
Mary Smith	Heir, Beneficiary, Nominated Personal Representative & Trustee	555 Blank Street, Someplace, WI 51111	
John Miller	Heir, Beneficiary, Trust Beneficiary	100 First Street, Someplace, WI 51111	June 1, 2009
Susan Brown	Heir, Beneficiary	100 Second Street, Someplace, WI 51111	
Jane Jones	Heir	100 Third Street, Someplace, WI 51111	
Jacob Jones	Guardian of Estate of Jane Jones	100 Third Street, Someplace, WI 51111	

☐ 10. Other: _____

I REQUEST:

1. A statement of informal administration be issued.
☒ 2. The will, including any codicil(s), be admitted to informal administration.
3. Domiciliary letters be issued to Mary Smith
☒ 4. Letters of trust be issued to Mary Smith
for the following trust: Trust under the Will of William Decedent For the Benefit of John Miller

Letters of trust be issued to _____
for the following trust: _____

☐ 5. Other: _____

State of _____
County of _____
Subscribed and sworn to before me on _____

_____
Notary Public/Court Official

_____
Name Printed or Typed

My commission/term expires: _____

▶ _____
Applicant

Mary Smith
Name Printed or Typed

555 Blank Street
Address

Someplace, WI 51111

(715) 999-9999
Telephone Number

July 30, 2011
Date

Form completed by: (Name) Mary Smith	
Address 555 Blank Street Someplace, WI 51111	
Telephone (715) 999-9999	Bar Number (if any) N/A

<u>Proof of Heirship</u> (Informal and Formal Administration)

<u>Form No.:</u> PR-1806 (Rev. 10/07/2010)

<u>Purpose of Form:</u> To document, under oath, the person(s) who are the heirs of the decedent.
To be completed by the person seeking to prove heirship.

<u>Directions:</u>

PAGE 1.

Type or print the name of deceased's county at the top of the Proof of Heirship and insert the name of the deceased below the words "In the Matter of the Estate of…". Check the box for "Informal" administration. Leave the case number blank, as the Probate Registrar will assign the case number.

1. Fill in your name, address and relationship to the deceased.
2. Check the appropriate box. If the deceased was survived by a spouse or domestic partner, fill in the name of that person.
3. Under 3A, check the appropriate box. If the deceased had children, list the names of all children. If any child is deceased, indicate the date of death.
   Under 3B, for each deceased child, list the name(s) of his or her children. If any of those children are deceased, indicate the date of death.
4. Indicate whether all of the deceased's children are also the children of any surviving spouse or domestic partner. If the answer to this question is "no", then provide details.

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.

5. Check the appropriate box; if the answer was "yes", then fill in the name of the parent(s).

PAGE 2.

6. Under 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.
   Under 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.
7. Read the information on the form and fill in any names if applicable.
8. Question No. 8 MUST BE ANSWERED.

Sign and date the form in front of a Notary Public.

Fill in the "Form completed by" box.

The original of this form is filed with the Office of Register in Probate along with the Application for Informal Administration (PR-1801). This form must be sent to or served upon all interested persons by you.

STATE OF WISCONSIN, CIRCUIT COURT, (DECEASED'S COUNTY)_____ COUNTY

For Official Use

☐ Amended

IN THE MATTER OF THE ESTATE OF

WILLIAM DECEDENT,

deceased

Proof of Heirship

☒ Informal Administration

☐ Formal Administration

SAMPLE

Case No._____

UNDER OATH, I ANSWER THE FOLLOWING QUESTIONS:

1. What is your name, mailing address and relationship to the decedent?

Name	Mailing Address	Relationship
Mary Smith	555 Blank Street, Someplace, WI 51111	Daughter

2. Was the decedent survived by a spouse or domestic partner? ☐ Yes ☒ No

   If YES, give name: _____

3. A. Did the decedent have any children? (Living or deceased; natural or adopted.) ☒ Yes ☐ No

   If YES, list all names. (If deceased, indicate date of death.) ☐ **See attached**

Name of Decedent's Children	If Deceased, Date of Death
Mary Smith	
Joan Miller	December 1, 2010
Susan Brown	
Jane Jones	

   B. For each deceased child listed 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 the names of his or her descendants. (Living or deceased; natural or adopted.) ☐ **See attached**

Name of Deceased Child in (3A)	Name of Deceased Child's Child(ren)	Date of Death
Joan Miller	John Miller	

4. If there is a surviving spouse or domestic partner, are all of the decedent's children listed in 3A, also the children of the surviving spouse or domestic partner? ☐ Yes ☐ No

   If NO, give details: _____

Instructions:
Are there living persons listed in answers to questions 2 through 4? • If Yes, skip to question 8. • If No, continue with question 5.

5. Did the decedent leave surviving parents? ☐ Yes ☐ No

   If YES, list names.

Name

6. A. If no surviving parent, did the decedent have brothers or sisters? (Living or deceased; whole blood, half blood, adopted)

☐ No ☐ Yes

If YES, list all names. (If deceased, indicate date of death.)

Name of Decedent's Brothers or Sisters	If Deceased, Date of Death

B. For each deceased brother or sister listed 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 the names of his or her descendants. (Living or deceased; natural or adopted) ☐ **See attached**

Name of Deceased Brother or Sister in (6A)	Date of Death	Name of Deceased Brother's or Sister's Children

7. If there are **no living persons** listed in questions 2 through 6B, list names of maternal (mother) and paternal (father) grandparents and the descendents of any deceased grandparent and whether the person is living or deceased. Please continue listing children of deceased persons until a living person is named. ☐ **See attached**

MATERNAL (Mother)	PATERNAL (Father)
Grandfather:	Grandfather:
Grandmother:	Grandmother:
Descendents:	Descendents:

8. Did any of the persons named in 2 through 7 die within 120 hours (5 days) after the death of the decedent?

☒ No ☐ Yes

If YES, list name(s), date of death and descendant(s).

Name	Date of Death	Descendant(s)

State of _____

County of _____

Subscribed and sworn to before me on _____

_____
Notary Public/Court Official

_____
Name Printed or Typed

My commission/term expires: _____

▶ _____
Signature

Mary Smith
Name Printed or Typed

(715) 999-9999
Telephone Number

July 30, 2011
Date

Form completed by: (Name) Mary Smith	
Address 555 Blank Street Someplace, WI 51111	
Telephone Number (715) 999-9999	Bar Number (If any) N/A

Waiver and Consent (Informal Administration)

Form No.: PR-1803 (Rev. 10/07/2010)

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 notice requirements for a hearing to open the estate.

A waiver and consent form is required 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 and there is a Will nominating a personal representative willing to act, a hearing will be required to open the estate.

Note: If there is no Will (the decedent died intestate), informal administration will not be permitted unless all interested persons (heirs only in this instance) request or consent in writing to informal administration and the appointment of the same person as personal representative.

Directions:

Type or print the name of the deceased's county at the top of the Waiver and Consent and insert the name of the deceased below the words "In the Matter of the Estate of…". Leave the case number blank, as the Probate Registrar will assign the case number.

- Check the appropriate boxes on Line 5 and insert the dates, if applicable.
- If there is a Will, check the box on Line 6 and insert the date of the Will and date of any Codicil to the Will.
- In line 7 insert the name of the person seeking to be appointed as Personal Representative.
- The name of each interested person or beneficiary must be printed or typed in the box for this purpose and each must sign and date the form.

Fill in the "Form completed by" box.

***Note:** More than one interested person may sign on one form.

STATE OF WISCONSIN, CIRCUIT COURT, (DECEASED'S COUNTY)_____ COUNTY

For Official Use

IN THE MATTER OF THE ESTATE OF

WILLIAM DECEDENT,

deceased

☐ Amended

Waiver and Consent
(Informal Administration)

Case No._____

SAMPLE

1. I am by law an interested person in this estate.
2. I am not a minor.
3. I have not been found incompetent and I do not have a guardian.
4. I waive any further notice of the hearing on the application for informal administration. I enter my appearance in this matter, and consent to the requests made in the application for informal administration.
5. I have received a list of all interested persons, and *(Choose one)*
   - ☒ a copy of the will dated October 1, 2010 and codicil(s) (if any), dated _____.
   - ☐ a notice of the nature and amount of the bequest contained in the will dated _____ or codicil(s) (if any), dated _____.
   - ☐ decedent died leaving no will.

☒ 6. I consent to the admission of the will dated October 1, 2010 and codicil(s) (if any), dated _____.

7. I consent to the appointment of Mary Smith as personal representative(s) in this estate.

☐ 8. Other: _____

Name Printed or Typed	Signature	Date
John Miller, by his Guardian ad Litem, George Johnson		
Susan Brown		
Jane Jones, by her Guardian of Estate		
Mary Smith, individually, and as nominated personal representative and trustee		

Form completed by: (Name) Mary Smith	
Address 555 Blank Street Someplace, WI 51111	
Telephone (715) 999-9999	Bar Number (If any) N/A

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

Form No.: PR-1807 (Rev. 10/10/2010)

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 for service of process by a nonresident personal representative.

Directions:

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

1. Read Line 1 of the Consent to Serve. You are accepting the duties and responsibilities of personal representative and agree that the court has personal jurisdiction over you in any court proceedings relating to the estate.

2. This paragraph applies only 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**, check the box in No. 3 and fill in the name of the Wisconsin resident you wish to appoint to accept service of process on your behalf if that becomes necessary. This person is then known as the "Resident Agent".

Check with the Office of Register in Probate to see if you must sign this form prior to meeting with the Registrar or if you must wait until you meet with the Registrar to open the estate.

On the bottom portion of the form:

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

Fill in the "Form completed by" box.

STATE OF WISCONSIN, CIRCUIT COURT, (DECEASED'S COUNTY)_____ COUNTY

For Official Use

IN THE MATTER OF THE ESTATE OF

WILLIAM DECEDENT,

deceased

☐ Amended

Consent to Serve

☒ Informal Administration
☐ Formal Administration

Case No._____

SAMPLE

1. I consent to serve as ☒ personal representative ☐ special administrator of this estate.
   I accept the duties, submit personally to the jurisdiction of the court in any proceeding relating to the estate that may be instituted by any interested person and agree to be bound by the laws of Wisconsin.

2. I will file any required bond.

☐ 3. I am a nonresident of Wisconsin.

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

▶ Mary Smith
Signature

Mary Smith
Name Printed or Typed

555 Blank Street
Address

Someplace, WI 51111

(715) 999-9999
Telephone Number

July 30, 2011
Date

Acceptance by Resident Agent

I accept appointment as resident agent for this estate to accept service of process.

▶ _____
Resident Agent

_____
Name Printed or Typed

_____
Address

_____

_____
Telephone Number

_____
Date

Form completed by: (Name) Mary Smith	
Address 555 Blank Street Someplace, WI 51111	
Telephone Number (715) 999-9999	Bar Number (If any) N/A

PR-1807, 10/10 Consent to Serve (Informal, Formal, and Special Administration) §§856.23, 865.08(2), 867.17, 879.67, Wisconsin Statutes

This form shall not be modified. It may be supplemented with additional material.

Statement of Informal Administration

Form No.: PR-1808 (Rev. 10/10/2010)

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

Directions:

Type or print the name of deceased's county at the top of the Statement of Informal Administration and add the deceased's name just below the words "In the Matter of the Estate of…". Leave the case number blank. The Registrar will insert the case number.

- In Line 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
- In Line 5, insert the date of death and:
  A. Check the box if there is no Will.
  B. Check the box if there is a Will and insert the date of the Will and codicil.
     Check the appropriate box indicating where the Will is located.
- In Line 6, insert the name of the nominated Personal Representative.
- Read Line 7 and check the appropriate box.

Below the words "THE PROBATE REGISTRAR STATES:"

- In Line 2, if there is a Will, insert the date of the Will.
- In Line 3, if there is a Codicil, insert the date of the Codicil.
- In Line 4, insert the name of the Personal Representative and check the appropriate box about a bond.
- In Line 5, if Letters of Trust must also be issued, insert the name of the Trustee and check the appropriate box concerning a bond.

Fill in the "Form completed by" box.

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 WILLIAM DECEDENT, deceased	☐ Amended **Statement of Informal Administration** Case No.	**SAMPLE**

An application for informal administration was filed.

THE PROBATE REGISTRAR FINDS:

1. The application is complete, including verification.
2. The applicant is an interested person.
3. The court has jurisdiction and is the proper venue.
4. The requests and consents regarding use of informal administration are complete and notice was
   - ☐ given to all persons entitled to notice.
   - ☒ waived.
5. The decedent died on (Date) July 1, 2011, leaving
   - ☐ A. no will.
   - ☒ B. a will dated October 1, 2010; codicil(s) (if any) dated _____; that
     - ☐ was/were in possession of the court
     - ☒ accompanied the application
     - ☐ was/were administered elsewhere and an authenticated copy accompanies the application

   and is a valid uncontested document(s) executed in compliance with the statutes 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.
7. ☒ No administration is pending either before the court or in another jurisdiction, OR
   ☐ Administration is pending either before the court or in another jurisdiction and no demand was made for formal administration. Proof of administration accompanies the application.

☐ 8. Other: _____

THE PROBATE REGISTRAR STATES:

1. The application for informal administration is granted.

☒ 2. The will dated October 1, 2010 is admitted.

☐ 3. The codicil(s) (if any) dated _____ is/are admitted.

4. Domiciliary letters are issued to Mary Smith
   - ☒ and no bond is required.
   - ☐ upon filing and acceptance of ☐ a signature bond. ☐ a surety bond in the sum of $ _____.

☒ 5. Letters of trust are issued to Mary Smith
   for the following trust: Trust Under Will of William Decedent for benefit of John Miller,
   - ☒ and no bond is required.
   - ☐ upon filing and acceptance of ☐ a signature bond. ☐ a surety bond in the sum of $ _____.

☐ 6. Other: _____

☐ **See attached for any additional trusts.**

Form completed by: (Name) Mary Smith	
Address 555 Blank Street Someplace, WI 51111	
Telephone Number (715) 999-9999	Bar Number (If any) N/A

_____
Probate Registrar

_____
Name Printed or Typed

_____
Date

This form shall not be modified. It may be supplemented with additional material.

Domiciliary Letters

Form No.: PR-1810 (Rev. 10/10/2010)

Purpose of the Form: To provide written proof that a person is authorized by the court to act as Personal Representative on behalf of the estate.

Directions:

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…" Check the box for "Informal". The Probate Registrar will fill in the case number.

- Fill in the section after "To:" with the name and address of the Personal Representative.
- Fill in the decedent's date of birth, date of death, county and state.

The Probate Registrar will sign this form and complete the signature area.

In the lower left-hand corner of the form fill in the name, address and telephone number of the person completing the form.

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

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

For Official Use

IN THE MATTER OF THE ESTATE OF

☐ Amended

WILLIAM DECEDENT,

Domiciliary Letters
☒ Informal Administration
☐ Formal Administration

SAMPLE

deceased

Case No.

To: Mary Smith
555 Blank Street
Someplace, WI 51111

The decedent, with date of birth December 30, 1940 and date of death July 1, 2011, was domiciled in (deceased's county) County, State of Wisconsin.

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

You are authorized to administer the estate as required by law.

Other: _____

(Seal)

LETTERS ISSUED BY:

☐ Circuit Court Judge ☐ Circuit Court Commissioner ☐ Probate Registrar

Name Printed or Typed

Date

Form completed by: (Name) Mary Smith	
Address 555 Blank Street Someplace, WI 51111	
Telephone Number (715) 999-9999	Bar Number (If any) N/A

Notice to Creditors (Informal Administration)

Form No.: PR-1804 (Rev. 10/10/2010)

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:

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…". The Probate Registrar will fill in the case number.

- Line 2: fill in decedent's date of birth, date of death, county, state and address.
- The Probate Registrar will fill in the claims date on Line 4, the location for filing the claim on Line 5 and the name of the newspaper near the bottom of the form.
- In the lower left-hand corner of the form fill in the name, address and telephone number of the Personal Representative.

The Probate Registrar will provide a copy to the Personal Representative.

The Personal Representative is responsible for forwarding a copy of the Notice to Creditors to the newspaper for publication, but some Probate Offices will forward it for you. Check with your Probate Registrar about how the Notice of Creditors should be delivered to the newspaper. It must be sent promptly, as the first publication must occur within 15 days of the date the Probate Registrar signed the Notice to Creditors.

The Personal Representative is also responsible for serving a copy of the Notice to Creditors 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 WILLIAM DECEDENT, deceased	☐ Amended **Notice to Creditors** (Informal Administration) Case No._____	**SAMPLE**

PLEASE TAKE NOTICE:

1. An application for informal administration was filed.
2. The decedent, with date of birth December 30, 1940 and date of death July 1, 2011, was domiciled in (deceased's county) County, State of Wisconsin, with a mailing address of 123 Something Street, Someplace, WI 51111.
3. All interested persons waived notice.
4. The deadline for filing a claim against the decedent's estate is (Date) _____.
5. A claim may be filed at the (deceased's county) County Courthouse, _____, Wisconsin, Room _____.

_____
Probate Registrar

_____
Name Printed or Typed

_____
Date

Form completed by: (Name) Mary Smith	
Address 555 Blank Street Someplace, WI 51111	
Telephone (715) 999-9999	Bar Number (If any) N/A

DO NOT PRINT the following text when publishing this notice.
Notice to Newspaper and Personal Representative:
Notice must be given by publication of this notice in the following newspaper: (name of official county newspaper) once a week for three consecutive weeks; the first publication date must be within 15 days from the date of this notice.

The personal representative is responsible for providing the deadline for filing a claim against the decedent's estate to all known or reasonably ascertainable creditors.

Notice Setting Time to Hear Application and Deadline for Filing Claims
(Informal Administration)

Form No.: PR-1805 (Rev. 10/10/2010)

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

Directions:

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…". The Probate Registrar will fill in the case number.

- Line 2: fill in decedent's date of birth, date of death, county, state and address.
- The Probate Registrar will fill in the necessary information on Line 3, claims date on Line 4, the location for filing the claim on Line 5 and the name of the newspaper near the bottom of the form.
- In the lower left-hand corner of the form fill in the name, address and telephone number of the Personal Representative.

The Personal Representative is responsible for mailing a copy of this Notice, a copy of the Application for Informal Administration, and a copy of the Will and Codicil (if any) to all interested persons.

The Personal Representative is responsible for mailing a copy of this Notice to "all known or reasonably ascertainable creditors," as indicated on the form.

The Personal Representative must also complete an Affidavit of Service (Probate) PR-1817 indicating when a copy of this Notice, Application for Informal Administration and Will and Codicil were provided to all interested persons.

The Personal Representative is also responsible for forwarding a copy of this Notice to the newspaper for publication. It must be delivered to the newspaper promptly, as the first publication must occur within 15 days of the date the Probate Registrar signed the Notice.

If there are persons interested in the estate but you do not know their names or addresses there is a check box near the middle of this form for you to check and a place to indicate the persons who are unknown (i.e. unknown heirs of John Miller) or that a specific person (i.e. James Smith) has no known address. Do not check this box unless you are missing addresses or names and addresses of unknown persons. A Guardian ad Litem may be required to represent these unknown persons. The Probate Registrar will tell you if this is a requirement.

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

For Official Use

☐ Amended

IN THE MATTER OF THE ESTATE OF

WILLIAM DECEDENT,

deceased

Notice Setting Time to Hear Application and Deadline for Filing Claims
(Informal Administration)

Case No. _____

SAMPLE

PLEASE TAKE NOTICE:

1. An application for informal administration was filed.
2. The decedent, with date of birth December 30, 1940 and date of death July 1, 2011 was domiciled in (deceased's county) County, State of Wisconsin, with a mailing address of 123 Something Street, Someplace, WI 51111 _____.
3. The application will be heard at the (deceased's county) County Courthouse, _____, Wisconsin, Room _____, before _____, Probate Registrar, on (Date) _____ at (Time) _____.

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

4. The deadline for filing a claim against the decedent's estate is (Date) _____.
5. A claim may be filed at the (deceased's county) County Courthouse, _____, Wisconsin, Room _____.
6. This publication is notice to any persons whose names or address are unknown.

***DO NOT PRINT the following if left blank:**

*☐ The names or addresses of the following interested persons (if any) are not known or reasonably ascertainable:_____

If you require reasonable accommodations due to a disability to participate in the court process, please call _____ at least 10 working days prior to the scheduled court date. Please note that the court does not provide transportation.

☐ **Please check with person named below for exact time and date.**

_____
Probate Registrar

_____
Name Printed or Typed

_____
Date

Form completed by: (Name) Mary Smith	
Address 555 Blank Street Someplace, WI 51111	
Telephone Number (715) 999-9999	Bar Number (If any) N/A

DO NOT PRINT the following text when publishing this notice.
Notice to Newspaper and applicant:
Notice must be given by publication of this notice in the following newspaper: (official county newspaper) once a week for three consecutive weeks; the first publication date must be within 15 days from the date of this notice.

The applicant is responsible for providing a copy of this notice, a copy of the will and codicils (if any) or notice of the nature and amount of devise or bequest to all interested persons

- by mailing at least 20 days before the hearing; **OR**
- by personal service at least 10 days before the hearing.

The applicant/personal representative is responsible for providing the deadline for filing a claim against the decedent's estate to all known or reasonably ascertainable creditors.

Probate Claims Notice

Form No.: F- 13033 (Rev. 07/08)

Purpose of Form: To provide written notice to the Department of Health Services and County Clerk of the decedent's date of death and whether the decedent or decedent's spouse received medical assistance.

Directions:

- Fill in name of decedent.
- Fill in name of county.
- Fill in Social Security Number of deceased.
- Insert the type of administration (probate).
- Fill in the date of death.
- The Probate Registrar will fill in the case number.
- Fill in the date of birth.
- The Probate Registrar will fill in the "final date to file claims".
- If the deceased received Medicaid benefits, etc., check the box.
- If the decedent's predeceased spouse received benefits, check the box.
- Fill in the name of the predeceased spouse and Social Security Number.
- Fill in the Personal Representative's name and address where indicated.
- Fill in the name and address of the attorney for the estate, if appropriate.

Mail a copy of this document by certified mail (or registered mail), return receipt requested to the following:

1. State of Wisconsin, Department of Health Services.
2. County Clerk of the county in which the deceased was a resident.

Original document is filed with the Office of Register in Probate. Also file the certified mail cards showing that the County Clerk and the Department received this Probate Claims Notice from you, if your Registrar requires this.

NOTE: The Probate Claim Notice form has a "Proof of Mailing" section at the bottom that would require your signature before a Notary Public. It is not possible to complete this section of the form correctly until after you have mailed copies and filed the original form with the Register in Probate. You should talk to the Probate Registrar about this form deficiency before attempting to complete this form.

SAMPLE

DEPARTMENT OF HEALTH SERVICES
Division of Health Care Access and Accountability
F-13033 (07/08)

STATE OF WISCONSIN
Wisconsin Statutes
Section 859.07

PROBATE CLAIMS NOTICE

Completion of this form is required according to Wisconsin Statutes ss. 859.07(02), 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 865.17

In the Matter of the Estate of:	STATE OF WISCONSIN, Circuit Court Branch
Name of Deceased William Decedent	County (deceased's county)
Social Security Number 111-11-1111	Type of Probate Informal
Date of Death July 1, 2011	File Number
Date of Birth December 30, 1940	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 Purchas 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 attached 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 or 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 Mary Smith	Mailing Address 555 Blank Street, Someplace, WI 51111
Name of Attorney	Mailing Address

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

I, _____ being duly sworn on oath certify that on the _____ day of _____, 20 _____ Mailed via the Us. 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 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 _____

_____
Signature

_____
Notary Public/Court Official

My commission expires _____

Notice of Fiduciary Relationship

Form No.: IRS Form 56 (Rev. December 2007)

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 (also applies to Trustees).

Directions:

Downloadable forms with instructions (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, the IRS requires you to file a written notice with the IRS stating this, using Form 56, Notice Concerning Fiduciary Relationship. 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. A Form 56 is also used to notify the IRS that a fiduciary appointment has terminated.

SAMPLE ONLY

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

Notice Concerning Fiduciary Relationship

(Internal Revenue Code sections 6036 and 6903)

OMB No. 1545-0013

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) ☐ Will and codicils or court order appointing fiduciary . . . . . (2) Date of death .....

b(1) ☐ Court order appointing fiduciary . . . . . (2) Date (see instructions) .....

c ☐ Valid trust instrument and amendments

d ☐ 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. 16375I 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**

Please Sign Here

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

Fiduciary's signature	Title, if applicable	Date

CHECKLIST FOR CLOSING AN INFORMAL ESTATE ADMINISTRATION

	TO CLOSE AN ESTATE
	Affidavit of Service (Probate) (PR-1817) • Showing that a copy of Will/Application/Notice was mailed to all interested persons who have not signed a Waiver and Consent (PR-1803). • Showing that a copy of the Inventory was mailed to all interested persons. • Showing that a copy of the Estate Account was mailed to all interested persons.
	Proof of Publication (Obtained from newspaper where the Notice was published.)
	Inventory (with schedules) (PR-1811) Fee Required - .2% of net assets for estates opened after September 1, 2001. Due within 6 months from date Personal Representative is appointed unless time to file has been shortened per local practice.
	Final Estate Account (Informal and Formal Administration) with schedules (PR-1814)
	Estate Receipt (PR-1815) • Each distributee must provide a receipt for all distributions received. • Receipts can also be used to demonstrate that claims have been paid in full and satisfied.
	Closing Certificate for Fiduciaries (Obtained from the State of Wisconsin after filing a Fiduciary Tax Return and/or Schedule CC)
	Statement of Personal Representative to Close Estate (Informal Administration) (PR-1816)

<u>Inventory</u> (Informal and Formal Administration)

<u>Form No.:</u> PR-1811 (Rev. 10/10/2010)

<u>Purpose of Form:</u> To identify and list the **fair market value** of property and assets owned by the deceased **on the date of death** that are subject to estate administration.

<u>Directions:</u>

PAGE 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…". Check the box for "Informal". Fill in the case number.

- Fill in date of death
- Fill in total value of property/assets subject to administration (from page 2).
- Fill in total value of encumbrances, liens or other charges (from page 2).
- Fill in net value of property/assets subject to administration (from page 2).
- Sign inventory in front of a notary public (after all Schedules are completed on page 2).

Fill in the "Form completed by" box.

PAGE 2.

- Fill in case number.
- List/describe, by numbered Schedules, the property subject to administration and **fair market values as of date of death**. Include accrued interest and dividends, if any.
- List with each item of property any encumbrance, lien, or charge.
  (NOTE: This is not meant for listing "charge cards." A "charge" is something like a lien or encumbrance on a specific item of property. A mortgage, for example, is an encumbrance on real estate).
- Identify each item of property that is marital property.

Attach supporting schedule, if necessary - read the form carefully.

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

For Official Use

☐ Amended

IN THE MATTER OF THE ESTATE OF

WILLIAM DECEDENT,

Inventory

☒ Informal Administration
☐ Formal Administration

SAMPLE

deceased

Case No. 11PR111

UNDER OATH, I STATE:

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

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

I will furnish a copy of this inventory to all persons interested as required by law.

SUMMARY OF PROPERTY SUBJECT TO ADMINISTRATION (Value of Decedent's Interest on date of death)	Date of Death July 1, 2011	
Total value of property subject to administration	$	352,795.09
Minus total value of encumbrances, liens or other charges against each item of property	($	89,637.55)
Net Value of Property Subject to Administration (cannot be less than $0)	$	263,157.54

Provide itemized lists on attached schedules and clearly designate any marital property interests.

NOTE: A statutory filing fee must accompany this form.

State of _____
County of _____
Subscribed and sworn to before me on _____

_____
Notary Public/Court Official

_____
Name Printed or Typed

My commission/term expires: _____

▶ _____
Personal Representative

Mary Smith
Name Printed or Typed

555 Blank Street
Address

(715) 999-9999
Telephone Number

December 1, 2011
Date

State of _____
County of _____
Subscribed and sworn to before me on _____

_____
Notary Public/Court Official

_____
Name Printed or Typed

My commission/term expires: _____

▶ _____
Personal Representative

_____
Name Printed or Typed

_____
Address

_____
Telephone Number

_____
Date

Form completed by: (Name) Mary Smith	
Address 555 Blank Street Someplace, WI 51111	
Telephone Number (715) 999-9999	Bar Number (If any) N/A

Number	**Supporting Inventory Schedules** (Description of property, legal description of real estate, and related encumbrances, liens or other charges against each item.) **Clearly designate marital property.**	**Value of Decedent's Interest on Date of Death**
1.	Lot 1, Block 2, Hannah's Addition, in the City of Someplace, Blue County, Wisconsin, (Postal address: 123 Something Street, Someplace, WI 51111) (First Mortgage: Northwest Savings Bank - $64,331.21) (Second Mortgage: Southeast Savings & Loan - $25,306.34)	$225,000.00
2.	CD # 22674 at Northwest Savings Bank Accrued Interest	25,000.00 632.47
3.	Savings Account # 111222 at Northwest Savings Bank Accrued Interest	21,210.00 324.32
4.	Checking Account # 33398 at Northwest Savings Bank	925.98
5.	ACME Corporation – stock – 200 Shares @ $24.55/share	4,910.00
6.	ABC Investments – Brokerage Account # 123654 EDF, Inc. -Stock – 150 Shares @ $15.23/share XYC Co. -Stock – 311 Shares @ $14.62/share Ltd. Foods, Inc. -Stock – 100 Shares @ $120.11/share	 2,284.50 4,546.82 12,011.00
7.	2009 ACME GTS automobile – VIN 2010GB543W789	26,500.00
8.	Antiques/Collectibles Antique Shaker corner cabinet Silver Dollar collection Sterling Silver Tea Set Toy train Set	 5,000.00 10,300.00 3,000.00 2,500.00
9.	Personal Property Household furniture and furnishings Appliances Tools Riding lawn tractor Jewelry	 6,000.00 800.00 600.00 750.00 500.00

Estate Account

Form No.: PR-1814 (Rev. 10/10/2010)

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

Directions:

PAGE 1. (A summary of the total figures from the schedules located on page 3.)

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…". Check the appropriate box (interim), (final) or (supplemental) and the "Informal" box. Fill in the case number. Check the box for personal representative and fill in the date of death of the decedent and the date on which you are completing the form.

Under "Receipts":

- Inventoried Assets: Insert the Net Value of Property figure from the Inventory on file;
- 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.
- Schedule B – Dividends: List the total of any dividends received and not already listed in the Inventory;
- Schedule C – Interest: List the total of any interest received and not already listed in the Inventory;
- Schedule D – Capital Gains/Losses: List the total of any capital gains or losses;
- Schedule E – Other Receipts: List the total of any other property received and not accounted for in Schedules A-D.
- Balancing Totals: Add all the amounts in the "TOTAL" column regarding receipts and enter it in the space next to "Total".

Under "Disbursements":

- Schedule F – Funeral Expenses: List the total of the funeral expenses.
- Schedule G – Debts of Deceased: List the total of all debts paid.
- Schedule H – Claims: List the total of all claims paid.
- Schedule I – Taxes Paid: List the total of all taxes paid.
- Schedule J – Interest Paid: List the total of all interest paid.
- Schedule K – Administration Expenses: List the total of all administrative expenses paid.
- Schedule L – Other payments: List the total of all other bills paid other than attorney fees.
- Schedule M – Distributions Paid to Date: List the total of all partial payments made to the beneficiaries (or heirs, if there has been no Will admitted to administration) up to the date of preparing this Estate Account.
- Total Disbursements: Add all the amounts in the "TOTAL" column regarding disbursements (Schedules F-M) and enter it in the space next to the "total disbursements".
- Schedule N – Assets on Hand: Value of assets that remain to be distributed.
- Balancing Totals: Add the total disbursements and the total assets on hand and enter that total as the "TOTAL" for the disbursements column.

NOTE: The totals for Receipts and for Disbursements and Assets on Hand **MUST** be the same. If they are not, there is an error.

- Assets on Hand (Schedule N): Insert the same figure as shown in Schedule N, above.
- Minus Requested Fees: Insert the amount of any personal representative fees, guardian ad litem fees, special administrator fees, and attorney fees, personal representative fees or guardian ad litems fees (if none, state) and extend the total of these four (4) items.
- Balance Available for Distribution: Subtract the total of the four fees listed above from the total amount of Assets on Hand.
- Schedule O – Proposed Distribution: Insert the total of the proposed distributions that are shown in Schedule O.

The Personal Representative or Co-Personal Representatives must sign this document in front of a Notary Public.

PAGE 2.

- Insert the case number.
- Provide the information required in the "Form Completed by" box.
- Insert the names of the interested persons, their addresses and, if minors, their dates of birth.

PAGE 3.

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

Schedule F – Funeral Expenses:

Sunset Monuments ……..…….....$2,700.00
John's Funeral Home…….……..5,580.47
The total of this Schedule……..…….....**$8,280.47**
(This should then be inserted on Page 1 of the Estate Account in the Disbursements column, Funeral Expenses Schedule F.)

NOTE: THAT THIS SAMPLE ESTATE ACCOUNT IS FOR AN ESTATE WITH A WILL THAT PROVIDES FOR SPECIFIC ITEMS OF PERSONAL PROPERTY TO BE DISTRIBUTED TO CERTAIN BENEFICIARIES UNDER THE WILL. THE SAMPLE RECEIPTS DEMONSTRATE HOW THE ASSETS WERE DISTRIBUTED. IF THERE IS NO WILL IN YOUR INFORMAL ESTATE ADMINISTRATION, IT IS LIKELY THAT THE DISTRIBUTIONS TO HEIRS MUST FOLLOW PERCENTAGE DISTRIBUTIONS SET FORTH IN CHAPTER 852 OF THE WISCONSIN STATUTES.

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

For Official Use

IN THE MATTER OF THE ESTATE OF

WILLIAM DECEDENT,

deceased

☐ Amended

☐ Interim
☒ Final
☐ Supplemental

SAMPLE

Estate Account
☒ Informal Administration
☐ Formal Administration

Case No. 11PR111

UNDER OATH I VERIFY:

I am the ☒ personal representative ☐ special administrator of this estate and this estate account is true and correct. The following is my account of the administration of this estate from (Date of Death or Date of prior account) July 1, 2011 to (Date) January 20, 2012. **List interested persons on page 2.**

RECEIPTS		TOTAL	DISBURSEMENTS		TOTAL
Net Value of property, subject to administration from Inventory (or assets on hand as of last account)		$ 263,157.54	Funeral Expenses	Schedule (F)	$ 8,280.47
Added Property to which the decedent was entitled to on Date of Death not included in Inventory or Prior Account	Schedule (A)	5,831.00	Debts of Decedent	(G)	949.74
Dividends	(B)	312.00	Claims (including those by judgment)	(H)	3,277.42
Interest	(C)	1,308.90	Taxes Paid	(I)	4,450.00
Capital Gains (Losses)	(D)	(12,502.84)	Interest Paid	(J)	0
Other Receipts	(E)	0	Administration Expenses (excluding fees)	(K)	636.36
			Other Payments	(L)	0
			Distributions Paid to Date	(M)	240,372.61
			TOTAL DISBURSEMENTS		$ 257,966.60
			Assets on Hand (N)		$ 140.00
	TOTAL	$ 258,106.60		**TOTAL**	$ 258,106.60

Totals in each column must be the same.

Assets on Hand Schedule (N)			$ 140.00
Minus Requested Fees:			
Personal Representative	$	0	
Guardian Ad Litem	$	140.00	
Special Administrator	$	0	
Attorney	$	0	$ 140.00
Balance Available for Distribution.			$ 0
List proposed distribution on Schedule (O)			$ 0

State of _____
County of _____
Subscribed and sworn to before me on _____

_____
Notary Public/Court Official

_____
Name Printed or Typed

My commission/term expires: _____

▶ _____
Personal Representative/Special Administrator

Mary Smith
Name Printed or Typed

555 Blank Street
Address

Someplace, WI 51111

(715) 999-9999
Telephone Number

Janaury 20, 2012
Date

State of _____
County of _____
Subscribed and sworn to before me on _____

_____
Notary Public/Court Official

_____
Name Printed or Typed

My commission/term expires: _____

▶ _____
Personal Representative/Special Administrator

_____
Name Printed or Typed

_____
Address

_____

_____
Telephone Number

_____
Date

Form completed by: (Name)	Telephone Number	Bar Number (If any)
Mary Smith	(715) 999-9999	N/A

Address
555 Blank Street
Someplace, WI 51111

ESTATE ACCOUNT SUPPORTING SCHEDULE

List of Interested Persons

The names and mailing addresses of all interested persons are as follows:
(For any person with disabilities, also list any guardian of estate; for any person in the military, also list attorney or attorney in fact; and for any minor, list date of birth.)

Name	Mailing Address	If Minor, Date of Birth
Mary Smith, individually and as Trustee	555 Blank Street, Someplace, WI 51111	
John Miller	100 First Street, Someplace, WI 51111	June 1, 2009
George Johnson, Guardian ad Litem for John Miller	200 First Street, Someplace, WI 51111	
Susan Brown	100 Second Street, Somplace, WI 51111	
Jane Jones	100 Third Street, Anyplace WI 52222	
Jacob Jones, Guardian of Estate for Jane Jones	100 Third Street, Anyplace WI 52222	

Schedule (A - O)	Estate Account Supporting Schedules (List details of each schedule)	Amount
A.	100 shares of GHI Company @ $58.31/share	$ 5,831.00
B.	ACME Corporation dividend GHI Company dividend EDF, Inc. dividend	215.00 49.00 48.00
C.	Northwest Savings Bank CD # 22674 Northwest Savings Bank Savings Acct. # 111222	1,174.65 134.25
D.	Loss on sale of real estate – Lot 1, Block 2, Hannah's Addition, in the City of Someplace, Deceased's County, Wisconsin	(12,502.84)
E.	None	0
F.	Sunset Monuments John's Funeral Home	2,700.00 5,580.47
G.	ABC Women's Clothing Store Mom Department Store	528.76 420.98
H.	Someplace Hospital	3,277.42
I.	Deceased 's County Treasurer	4,450.00
J.	None	0
K.	Inventory Filing Fee Filing Fee on Added Property (Schedule A) Newspaper publication fee Postage	526.32 11.66 65.27 33.11
L.	None	0
M.	Mary Smith: -100 share GHI Co. stock, toy train sets, household furniture and furnishings, riding lawn tractor, tools, jewelry, cash ¼ residual share ($38,709.82). Mary Smith as Trustee: -150 share EDF stock, 311 share XYZ stock, 100 shares Ltd. Foods stock, and 200 share ACME stock, cash ¼ residual share ($38,709.82). Susan Brown: -ACME GTS automobile, antique cabinet, coins, tea set and appliances, cash ¼ residual share ($38,709.82). Jacob Jones as guardian of estate of Jane Jones: -Cash ¼ residual share	54,890.82 62,462.14 84,309.82 38,709.83
N.	Cash (to pay fees: Personal Representative and Guardian ad Litem.	140.00
O.	None	0

Estate Receipt

Form No.: PR-1815 (Rev. 10/07/2010)

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

Directions:

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…". Check the box for "Informal". Fill in the case number.

1. Check the "personal representative" box and describe the property covered by the issuance of the receipt. (Cash payment, items of personal property, interest in real estate, etc.)
2. Check the appropriate No. 2 box if this is a distribution to an heir/beneficiary other than a trust.
3. If the receipt is for a claim against the estate, place a check in No. 3.
4. If this is a distribution to a living or testamentary trust, place a check in No. 4 and insert the name of the trust.

Fill in the "Form completed by" box.

Recipient signs the receipt, adding his or her address and the date signed.

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

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

☐ Amended

WILLIAM DECEDENT,

Estate Receipt

☒ Informal Administration
☐ Formal Administration

SAMPLE

deceased

Case No. 11PR111

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

Describe items of property or monies received	
Cash	$ 3,277.42

☐ 2. This is a ☐ partial ☐ full distribution of my share of the estate.

☒ 3. This is a full satisfaction of my claim.

☐ 4. This is a distribution of funds to trust. (Identify Trust) _____.

☐ 5. Other: _____.

▶ _____
Signature

Someplace Hospital
Name Printed or Typed

100 Twelfth Street
Address

Someplace, WI 51111

December 2, 2011
Date

Form completed by: (Name) Mary Smith	
Address 555 Blank Street Someplace, WI 51111	
Telephone Number (715) 999-9999	Bar Number (If any) N/A

PR-1815, 10/10 Estate Receipt (Informal Administration or Formal Administration) §§863.41, 865.21, and 867.21, Wisconsin Statutes

This form shall not be modified. It may be supplemented with additional material.

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

For Official Use

IN THE MATTER OF THE ESTATE OF

☐ Amended

WILLIAM DECEDENT,

Estate Receipt

☒ Informal Administration
☐ Formal Administration

SAMPLE

deceased

Case No. 11PR111

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

Describe items of property or monies received	
Toy Train Sets	$2,500.00
100 shares GHI Company	5,831.00
Household furnishings, tools, riding lawn tractor, jewelry	7,850.00
1/4 residual share	38,709.82

☒ 2. This is a ☐ partial ☒ full distribution of my share of the estate.

☐ 3. This is a full satisfaction of my claim.

☐ 4. This is a distribution of funds to trust. (Identify Trust) _____.

☒ 5. Other: Personal Representative's fee.

▶ _____
Signature

Mary Smith
Name Printed or Typed

555 Blank Street
Address

Someplace, WI 51111

December 28, 2011
Date

Form completed by: (Name) Mary Smith	
Address 555 Blank Street Someplace, WI 51111	
Telephone Number (715) 999-9999	Bar Number (If any) N/A

PR-1815, 10/10 Estate Receipt (Informal Administration or Formal Administration) §§863.41, 865.21, and 867.21, Wisconsin Statutes

This form shall not be modified. It may be supplemented with additional material.

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

For Official Use

IN THE MATTER OF THE ESTATE OF

☐ Amended

WILLIAM DECEDENT,

Estate Receipt

☒ Informal Administration
☐ Formal Administration

SAMPLE

deceased

Case No. 11PR111

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

Describe items of property or monies received	
150 sh. EDF	$ 2,284.50
311 sh. XYZ	4,546.82
100 sh. Ltd Foods	12,011.00
200 sh. ACME	4,910.00
1/4 residual share	38,709.82

☐ 2. This is a ☐ partial ☐ full distribution of my share of the estate.

☐ 3. This is a full satisfaction of my claim.

☒ 4. This is a distribution of funds to trust. (Identify Trust) William Decedent Trust f/b/o John Miller.

☐ 5. Other: _____.

▶ _____
Signature

Mary Smith, Trustee
Name Printed or Typed

555 Blank Street
Address

Someplace, WI 51111

December 28, 2011
Date

Form completed by: (Name) Mary Smith	
Address 555 Blank Street Someplace, WI 51111	
Telephone Number (715) 999-9999	Bar Number (If any) N/A

PR-1815, 10/10 Estate Receipt (Informal Administration or Formal Administration) §§863.41, 865.21, and 867.21, Wisconsin Statutes

This form shall not be modified. It may be supplemented with additional material.

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

For Official Use

IN THE MATTER OF THE ESTATE OF

☐ Amended

WILLIAM DECEDENT,

Estate Receipt

☒ Informal Administration
☐ Formal Administration

SAMPLE

deceased

Case No. 11PR111

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

Describe items of property or monies received	
2009 ACME GTS automobile - VIN 2010GB543W789	$26,500.00
Antique Shaker corner cabinet, silver dollar collection, sterling silver tea set, appliances	19,100.00
¼ residual share	38,709.82

☒ 2. This is a ☐ partial ☒ full distribution of my share of the estate.

☐ 3. This is a full satisfaction of my claim.

☐ 4. This is a distribution of funds to trust. (Identify Trust) _____.

☐ 5. Other: _____.

▶ _____
Signature

Susan Brown
Name Printed or Typed

100 Second Street
Address

Someplace, WI 51111

January 2, 2012
Date

Form completed by: (Name) Mary Smith	
Address 555 Blank Street Someplace, WI 51111	
Telephone Number (715) 999-9999	Bar Number (If any) N/A

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

For Official Use

IN THE MATTER OF THE ESTATE OF

☐ Amended

WILLIAM DECEDENT,

Estate Receipt

☒ Informal Administration
☐ Formal Administration

SAMPLE

deceased

Case No. 11PR111

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

Describe items of property or monies received	
Cash received by Guardian of Estate of Jane Jones	$38,709.83

☒ 2. This is a ☐ partial ☒ full distribution of my share of the estate.

☐ 3. This is a full satisfaction of my claim.

☐ 4. This is a distribution of funds to trust. (Identify Trust) _____.

☐ 5. Other: _____.

▶ _____
Signature

Jacob Jones, Guardian of Estate
Name Printed or Typed

100 Third Street
Address

Anyplace, WI 52222

December 30, 2011
Date

Form completed by: (Name) Mary Smith	
Address 555 Blank Street Someplace, WI 51111	
Telephone Number (715) 999-9999	Bar Number (If any) N/A

Affidavit of Service

Form No.: PR-1817 (Rev. 10/07/2010)

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

Directions:

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…". Fill in the case number. When you complete this form, you are swearing that you mailed a copy of a specific document OR documents to a certain party or parties concerned with the estate.

- Insert your name where indicated and the city and state where you live.
- Insert the mailing or service date next.
- In the "Documents Provided" section, insert the name of the document or documents that you have mailed or served.
- Check the box to indicate whether the original of that document(s) is already in the estate file in the Office of Register in Probate or if a copy of that document(s) is attached to the affidavit.
- Insert the names and addresses of all the individuals/businesses/creditors to which you have mailed a copy of the document you inserted earlier in this form and state the type of service (i.e.mail, personal service).
- Fill in the "Form completed by" box.

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

☐ Amended

IN THE MATTER OF

WILLIAM DECEDENT,

deceased

Affidavit of Service (Probate)

Case No. 11PR111

SAMPLE

I, (Name) Mary Smith of (City) Someplace, State of Wisconsin, being sworn, state that on (Date) August 1, 2011, I provided copies of the following documents:

Documents Provided
Notice to Creditors

☒ the original of which is on file, OR
☐ a copy of which is attached (no original on file)

to the following named persons at the mailing address as listed: ☐ **See attached**

NAME	MAILING ADDRESS	TYPE OF SERVICE***
Northwest Savings Bank	1 Northwest Plaza, Someplace, WI 51111	First class mail
Southeast Savings & Loan	101 South Fifth Street, Someplace, WI 51111	First class mail

***** TYPE OF SERVICE:** Refer to Wisconsin Statutes for proper manner of service.

Type of Service:
Personal Service
Mail
Certified mail return receipt requested

State of _____
County of _____
Subscribed and sworn to before me on _____

_____
Notary Public/Court Official

_____
Name Printed or Typed

My commission/term expires: _____

▶ _____
Signature

Mary Smith
Print or Type Name

555 Blank Street
Address

Someplace, WI 51111

(715) 999-9999
Telephone Number

August 2, 2011
Date

Form completed by: (Name) Mary Smith	
Address 555 Blank Street Someplace, WI 51111	
Telephone Number (715) 999-9999	Bar Number (If any) N/A

This form shall not be modified. It may be supplemented with additional material.

Statement of Personal Representative to Close Estate

Form No.: PR-1816 (Rev. 10/07/2010)

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

Directions:

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…". Fill in the case number.

- Read paragraphs 1-6 and determine if you have completed all tasks.
- In No. 7, insert the amount of any attorney fees paid.

The Personal Representative must sign the Statement in front of a Notary Public.

The original of this document must be filed in the Office of Register in Probate.

STATE OF WISCONSIN, CIRCUIT COURT, (DECEASED'S COUNTY) _____ COUNTY

For Official Use

IN THE MATTER OF THE ESTATE OF

WILLIAM DECEDENT,

deceased

☐ Amended

Statement of Personal Representative To Close Estate
(Informal Administration)

Case No. 11PR111

SAMPLE

I VERIFY THAT I, OR A PRIOR PERSONAL REPRESENTATIVE WHOM I HAVE SUCCEEDED:

1. Gave notice to interested persons and to creditors as required by law and that the time for filing claims expired prior to the date of this statement.
2. Fully administered the 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 otherwise specified below.
3. Inventoried the assets of the estate, furnished a copy of the inventory to interested persons and distributed the assets to the persons entitled to them.
4. Made the following detailed arrangements to accommodate any outstanding claims, expenses or taxes.
   ☒ None ☐ **See attached** _____
5. 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.
6. Furnished a full account of the administration, in writing, to all persons whose interests are affected.
7. Paid attorney fees of $0.00.
8. Understand that if no proceedings challenging this statement or otherwise involving me as personal representative are pending in the court 6 months after this statement is filed, my appointment as the personal representative terminates.

State of _____
County of _____
Subscribed and sworn to before me on _____

_____
Notary Public/Court Official

_____
Name Printed or Typed

My commission/term expires: _____

▶ _____
Personal Representative

Mary Smith
Name Printed or Typed

555 Blank Street
Address

Someplace, WI 51111

(715) 999-9999
Telephone Number

January 20, 2012
Date

State of _____
County of _____
Subscribed and sworn to before me on _____

_____
Notary Public/Court Official

_____
Name Printed or Typed

My commission/term expires: _____

▶ _____
Personal Representative

_____
Name Printed or Typed

_____
Address

_____

_____
Telephone Number

_____
Date

Declination to Serve or Resignation

Form No.: PR-1802 (Rev. 10/07/2010)

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. This form may also be used if a Personal Representative, Special Administrator or Trustee must resign.

Directions for Declination:

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…". Check the box for "Informal". The Probate Registrar will fill in the case number.

- In 1, check the appropriate box or boxes that apply.
- The person who is declining to act must sign and date this form where indicated and fill in the "Form completed by" box.

Directions for Resignation:

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…". Check the box for "Informal". Fill in the case number.

- Check the box for your title.
- Give the reason for your resignation.
- The person who is resigning must sign and date where indicated and fill in the "Form completed by" box.

Original of this form is filed with the Office of Register in Probate.

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

For Official Use

IN THE MATTER OF THE ESTATE OF

WILLIAM DECEDENT,

deceased

☐ Amended

Declination to Serve or Resignation

☒ Informal Administration
☐ Formal Administration

Case No. 11PR111

SAMPLE

☒ **DECLINATION TO SERVE**

1. I was named in the will or codicil of the decedent to serve as
   ☒ personal representative.
   ☐ testamentary trustee.

2. I have not undertaken any duties in this capacity.

3. I decline to serve in this capacity.

☐ **RESIGNATION**

1. I am the
   ☐ personal representative.
   ☐ testamentary trustee.
   ☐ special administrator.

2. I resign for the following reason(s):, ,

3. I request that the court accept my resignation.

4. I understand that I will not be discharged until
   a. I have completed all required duties and filed any required documents;
   b. a successor is appointed (if needed), AND
   c. the court issues an order of discharge.

▶

Signature

Albert Elliott

Name Printed or Typed

500 9th Street, Someplace, WI 51111

Address

(715) 999-0000

Telephone Number

July 30, 2011

Date

Form completed by: (Name)	
Address	
Telephone Number	Bar Number (If any)

Order Appointing Guardian ad Litem or Attorney

Form No.: GF-131 (Rev. 10/07/2010)

Purpose of the Form: Appoints either Guardian ad Litem or Attorney for an individual.

Directions:

At the top of the form insert the name of the deceased's county of residence and below the phrase "Case Caption", insert "In the Matter of the Estate of" and the decedent's name. The Probate Registrar will fill in the case number.

- Check the appropriate box for either a guardian ad litem or an attorney. The Probate Registrar will tell you which one is required.
- Insert the name, address and telephone number of the individual for whom a guardian ad litem or attorney will be appointed.
- Check the appropriate box to identify why the individual requires the appointment of a guardian ad litem or attorney appointed for him or her.
- If applicable, type in name and address of attorney requesting the appointment of a guardian ad litem.
- The Probate Registrar will appoint a guardian ad litem at the estate's expense and complete the remainder of the form.

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

For Official Use

☐ Amended

IN THE MATTER OF THE ESTATE OF:

WILLIAM DECEDENT,

deceased

Order Appointing Guardian ad Litem or Attorney

SAMPLE

Case No.

A matter is pending in this court and the following person involved in this proceeding requires the appointment of

☒ a guardian ad litem
☐ an attorney

because

Name: John Miller

Address: 100 First Street, Someplace, WI 51111

Telephone Number: (715) 999-9999

is ☒ a minor.
☐ an individual alleged to be incompetent.
☐ an individual determined to be incapacitated due to incompetency.
☐ in military service.
☐ an unknown person(s).
☐ subject of a chapter 51 proceeding.
☐ a deceased respondent in a paternity case.
☐ Other:

THE COURT ORDERS:

The appointment of the following person as ☒ guardian ad litem ☐ attorney for the above named individual.

Name: George Johnson

Address: 200 First Street, Someplace, WI 51111

Telephone Number: (715) 888-8888

Other:

Consent to Act: ☒ is ☐ is not required to be signed.

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

BY THE COURT:

▶

Signature

Date

☐ Circuit Court Judge ☐ Circuit Court Commissioner

Name Printed or Typed

Date

Name of Attorney requesting GAL	
Address	
Telephone	Bar No.

§§48.23, 48.235, 752.52, 757.48, 767.407, 813.123(3)(b), 879.23, 879.25, Chapters 51, 54 and 55, Wisconsin Statutes

This form shall not be modified. It may be supplemented with additional material.

Signature Bond

Form No.: PR-1809 (Rev. 10/07/2010)

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

Directions:

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…". Fill in the case number if one has already been assigned.

- 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.
- Insert the amount of bond as determined by the Probate Registrar (based on the estimated value of the estate).
- Check the box which corresponds with your title.
- The Principal must sign where indicated and the signature must be witnessed by two people.
- Any Surety must sign where indicated, in front of a Notary Public.
- In the lower left-hand corner of the form, complete the "Form completed by" box.
- If the bond is approved, the Probate Registrar will complete the remainder of the form.

The original is filed with the Office of Register in Probate.

STATE OF WISCONSIN, CIRCUIT COURT, (DECEASED'S COUNTY)_____ COUNTY

For Official Use

☐ Amended

IN THE MATTER OF THE ESTATE OF

WILLIM DECEDENT, deceased

For the following trust:

For the benefit of John Miller

June 1, 2009
Date of Birth

Signature Bond in Estate or Trust Proceedings

Case No._____

SAMPLE

I/we (Names) Mary Smith, principal(s)
and (Names) Larry Smith, surety(ies)
are liable to the Circuit Court in the sum of $100,000.00 for which payment I/we bind my/ourselves and my/our estate(s), jointly and severally.

If the principal faithfully performs duties as
- ☐ personal representative; ☐ special administrator; ☒ testamentary trustee;
- ☐ 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.

State of _____
County of _____
Subscribed and sworn to before me on _____

_____ Notary Public/Court Official

_____ Name Printed or Typed

My commission/term expires: _____

_____ Signature of Surety

_____ Address

_____ Signature of Surety

_____ Address

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

_____ Designated Court Official

APPROVED BY:

_____ Court Official

_____ Name Printed or Typed

_____ Date Bond Approved

Form completed by: (Name)	
Address	
Telephone Number	Bar Number (If any)

PR-1809, 10/10 Signature Bond in Estate or Trust Proceedings Chapters 701, 851 – 879, Wisconsin Statutes

This form shall not be modified. It may be supplemented with additional material.

Letters of Trust (Issued under Informal Administration)

Form No.: PR-1931 (Rev. 10/07/2010)

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:

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…". Fill in the name of the trust or the name of the person who will benefit from this trust below the words "For the following trust". Check the box for "Informal". The Probate Registrar will fill in the case number.

- Fill in the section after "To:" with the name and address of the Trustee.
- Insert the deceased's date of birth, date of death, county and state.
- The Probate Registrar will sign the Letters and complete the signature area.
- 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 Register in Probate.

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

☐ Amended

WILLIAM DECEDENT, deceased
For the following trust:

FOR THE BENEFIT OF JOHN MILLER

Letters of Trust
☒ Informal Administration
☐ Formal Administration

Case No.

SAMPLE

To: Mary Smith
555 Blank Street
Someplace, WI 51111

The decedent, with date of birth December 30, 1940 and date of death July 1, 2011, was domiciled in (deceased's county) County, State of Wisconsin.

The decedent's will was admitted to probate. You are granted letters of trust with the general powers and duties of trustee(s). You are authorized to administer the trust as required by law.

LETTERS ISSUED BY:

(Seal)

☐ Circuit Court Judge ☐ Circuit Court Commissioner ☐ Probate Registrar

Name Printed or Typed

Date

Form completed by: (Name) Mary Smith	
Address 555 Blank Street Someplace, WI 51111	
Telephone Number (715) 999-9999	Bar Number (If any) N/A

PR-1931, 10/10 Letters of Trust (Informal Administration and Formal Administration) §§701.16, 856.29, and 865.08(6), Wisconsin Statutes

This form shall not be modified. It may be supplemented with additional material.

Consent to Serve as Trustee

Form No.: PR-1930 (Rev. 10/07/2010)

Purpose of Form: To consent to serve as trustee and designate resident agent for nonresident trustee.

Directions:

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…". Fill in the name of the trust or the name of the person who will benefit from this trust below the words "For the following trust". Check the box for "Informal". The Probate Registrar will fill in the case number.

- **If you live outside the State of Wisconsin**, check the box in No. 3 and fill in the name of the Wisconsin resident you wish to appoint to accept service of process on your behalf if that becomes necessary. This person is then known as the "Resident Agent".

Check with the Office of Register in Probate to see if you must sign this form prior to meeting with the Registrar or if you must wait until you meet with the Registrar to open the estate.

On the bottom portion of the form:

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

In the lower left-hand corner of the form, fill in the "Form completed by" box.

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

For Official Use

IN THE MATTER OF THE ESTATE OF

☐ Amended

WILLIAM DECEDENT, deceased
For the following trust:

Consent to Serve as Trustee

☒ Informal Administration
☐ Formal Administration

SAMPLE

FOR THE BENEFIT OF JOHN MILLER

Case No. _____

1. I consent to serve as trustee and agree to carry out the terms of the trust according to the will. I submit personally to the jurisdiction of the court in any proceeding relating to the trust that may be instituted by any interested person and agree to be bound by the laws of Wisconsin.

2. I will file any required bond.

☐ 3. I am a nonresident of Wisconsin and have applied for letters in this trust.

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

▶ Mary Smith
Trustee

Mary Smith
Name Printed or Typed

555 Blank Street
Address

Someplace, WI 51111

(715) 999-9999
Telephone Number

July 30, 2011
Date

Acceptance by Resident Agent

I accept this appointment as resident agent.

▶ _____
Resident Agent

_____
Name Printed or Typed

_____
Address

_____

_____
Telephone Number

_____
Date

Form completed by: (Name)	
Mary Smith	
Address 555 Blank Street Someplace, WI 51111	
Telephone Number (715) 999-9999	Bar Number (If any) N/A

PR-1930, 10/10 Consent to Serve as Trustee (Informal Administration and Formal Administration)

§§223.105(2), 223.03(7), and 701.16(1), Wisconsin Statutes

This form shall not be modified. It may be supplemented with additional material.

Demand for Formal Proceedings (Informal Administration)

Form No.: PR-1813 (Rev. 10/07/2010)

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 the deceased's county of residence and add the deceased's name just below the words "In the Matter of the Estate of…". Fill in the case number.

1. Check the appropriate box to indicate whether you are the personal representative for the estate/interested person/representative of interested person/court official.

2. 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 supervise all the remaining proceedings for this estate.

   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. You may attach additional information to the form, if necessary for a complete explanation.

Sign and date the form at the bottom.

Fill in the "Form completed by" box.

The original of this document is filed with the Office of 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.

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

WILLIAM DECEDENT,

deceased

☐ Amended

Demand for Formal Proceedings
(Informal Administration)

Case No. 11PR111

SAMPLE

1. I am
   - ☒ the personal representative in this estate.
   - ☐ an interested person in this estate.
   - ☐ representatives of interested person.
   - ☐ a court official.

2. This matter is pending under informal administration and I demand formal proceedings for
   - ☐ the remaining administration of the estate.
   - ☒ limited issue(s): (Explain) I am objecting to a claim filed by XYZ Collections, Inc. and it it will be necessary to present my objection to the Court for a hearing and decision.

▶ Mary Smith
Signature

Mary Smith
Name Printed or Typed

December 1, 2011
Date

The signer of this document is required to serve a copy of this document on the personal representative.

If there is a personal representative, service of this document suspends the powers of the personal representative regarding these matters until reinstated by the court.

This suspends informal administration as to these matters until reinstated by the court.

Form completed by: (Name) Mary Smith	
Address 555 Blank Street, Someplace, WI 51111	
Telephone Number (715) 999-9999	Bar Number (If any) N/A

PR-1813, 10/10 Demand for Formal Proceedings (Informal Administration) §§865.03 and 865.05(3), Wisconsin Statutes

This form shall not be modified. It may be supplemented with additional material.

Notice of Distribution to Ward

Form No.: PR-1822 (Rev. 10/07/2010)

Purpose of Form: To notify the court appointing a guardian of the estate of property to be distributed to the guardian of the estate for the benefit of the guardian's ward.

Directions:

If an incompetent or minor is an heir/beneficiary of the estate, distributions may have to be made to that person's guardian of estate. Consult with the Probate Registrar to determine if this is necessary. If so, you must complete this form and send it to the court appointing the guardian of estate **at least ten (10) days prior to the distribution**.

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…". Check the box for "Informal". Fill in the case number.

- Insert the name of the court which appointed the guardian of estate.
- Insert the name of the guardian of estate.
- Describe the property distributed (cash payment, items of personal property, interest in real estate, etc.).
- Sign and date.

Fill in the "Form completed by" box.

The original of this document must be sent to the court appointing the guardian of the estate and a copy must be filed with the Office of Register in Probate in the decedent's county of residence.

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

For Official Use

IN THE MATTER OF ESTATE OF

William Decedent

☐ Amended

Notice of Distribution to Ward

☒ Informal Administration
☐ Formal Administration

Case No. 11PR111

SAMPLE

To: (Name of Court) Circuit Court for Blue County, Wisconsin the court that appointed the guardian of estate for (Name of Ward) Jane Jones.

PLEASE TAKE NOTICE:

As personal representative, I will distribute from this estate proceeding to (Name of guardian of estate) Jacob Jones, guardian of estate for (Name of Ward) Jane Jones the following property: ☐ **See attached**

Description of Property	Value
Cash	$37,364.88

I am providing this notice to you **at least 10 days** prior to the distribution.

▶ Mary Smith
Personal Representative

Mary Smith
Name Printed or Typed

December 15, 2011
Date

Form completed by: (Name) Mary Smith	
Address 555 Blank Street Someplace, WI 51111	
Telephone Number (715) 999-9999	Bar Number (If any) N/A

PR-1822, 10/10 Notice of Distribution to Ward (Informal Administration and Formal Administration) §863.43, Wisconsin Statutes

This form shall not be modified. It may be supplemented with additional material.

SAMPLE PAGE FOR RECORDKEEPING

O	Estate Account Schedule Letter (A-O) _____	Name of Estate Account Schedule _____	
	Date of Payment/Receipt	Description and/or Check Number	Dollar Amount
O			
O			