

IN THE MATTER OF THE ESTATE OF

AFFIDAVIT OF NO PROBATE

Deceased.

Case No: _____

Under oath, I state that:

1. _____ (name of decedent) died a resident of Eau Claire County, Wisconsin.

2. His/her

a. Post Office address and city was:

_____.

b. Date of death was: _____.

c. Date of birth: _____.

3. Attached is the original Last Will and Testament of the decedent.

4. I am:

One of the heirs of the decedent.

The person nominated as the personal representative in the Last Will.

Other: _____.

5. I am filing the Last Will with the Probate Court pursuant to Section 856.05 of the Wisconsin Statutes as there is no need for court-supervised probate because:

Dated: _____

Signature

Name printed/typed

Address

Subscribed and sworn to before me

On _____

Deputy/Register in Probate
Notary Public, State of Wisconsin
My Commission expires: _____