

STATE OF WISCONSIN, CIRCUIT COURT, _____ COUNTY

IN THE MATTER OF THE ESTATE OF

Final Account

- Informal
- Formal

_____ Case No. _____

I, the personal representative of this estate, certify that this Final Account is true and correct. The following is my account of the administration of this estate from _____ to _____.

(Date of Death or Date of Prior Account)

(Date)

List interested persons on page 2.

RECEIPTS	VALUES	DISBURSEMENTS	VALUES
Inventoried Assets	\$	Funeral Expenses (Schedule F)	\$
Added Property (Schedule A)		Debts of Decedent (G)	
Dividends (B)		Claims(including those by judgment) (H)	
Interest (C)		Taxes Paid (I)	
Capital Gains (Losses) (D)		Interest Paid (J)	
Other Receipts (E)		Administration Expenses (K)	
		Other Payments (L)	
		Distributions Paid to Date (M)	
		TOTAL DISBURSEMENTS	\$
		Assets on Hand (N)	\$
BALANCING TOTALS	\$		\$

Assets on Hand (Schedule N) \$ _____

Minus Requested Fees:

Attorney \$ _____

Personal Representative \$ _____

Guardian Ad Litem \$ _____ (\$ _____)

Balance Available for Distribution.

Specific assets must be listed in Schedule O. \$ _____

List of proposed distribution (Schedule P)

Subscribed and sworn to before me

on _____

_____ Notary Public/Court Official

My commission expires: _____

Name of Attorney
Address
Telephone Number

Signature of Personal Representative
Name Printed or Typed
Address
Signature of Personal Representative
Name Printed or Typed
Address

Final Account Supporting Schedule

List of Interested Persons

The names and addresses of all interested persons are:

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

<u>Name</u>	<u>Relationship</u>	<u>Address</u>	<u>D. O. B. if Minor</u>
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Schedule Alpha (A - P)	Final Account Supporting Schedules (List details of each schedule)	Total Values