

\_\_\_\_\_  
(your name)

\_\_\_\_\_  
(your street address)

\_\_\_\_\_  
(city, state, zip code)

\_\_\_\_\_  
(your phone number)

MONTANA \_\_\_\_\_ JUDICIAL DISTRICT COURT,  
(number of district in which your county is located)  
\_\_\_\_\_ COUNTY  
(name of your county)

In the Matter of the Estate of, ) **Probate Case No.**  
 )  
 ) **PERSONAL REPRESENTATIVE'S**  
\_\_\_\_\_, ) **SWORN STATEMENT TO**  
(name of the deceased) ) **CLOSE ESTATE**  
 )  
Deceased. )

\_\_\_\_\_, the Personal Representative of the above-named estate, states that:

1. I am the duly appointed, qualified and acting Personal Representative of the above-named estate.
2. I have published a Notice to Creditors as provided in M.C.A. § 72-3-801, and the time limitation for presentation of creditors' claims has expired.
3. I have fully administered the estate of the decedent by making payment, settlement, or other disposition of all claims which were presented, expenses of administration and estate, estate and other death taxes.

4. I have distributed the assets of the estate to the persons entitled to the assets in the amount and manner to which they are entitled as shown in the schedule attached hereto.

5. Choose one:

I have sent a copy of this statement to all distributees of the estate and to all creditors or claimants of the estate of whom I am aware whose claims are neither paid nor barred, and I have furnished a full account in writing of my administration to the distributees, whose interests are affected thereby.

The sole residual distributee is myself and, therefore, no accounting is required.

6. I have filed with the Clerk of Court (choose one):

A certificate from the Department of Revenue stating that no estate taxes are due.

A certificate from the Department of Revenue stating the amount of tax due, and a receipt from the County Treasurer stating that any estate taxes due on the assets has been paid.

7. More than 6 months has passed since I was appointed Personal Representative of the above-named estate.

8. This statement is filed for the purpose of closing this estate and terminating my appointment pursuant to M.C.A. § 72-3-1004.

DATED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

*(date)*

*(month)*

*(year)*

\_\_\_\_\_  
Personal Representative

State of \_\_\_\_\_  
County of \_\_\_\_\_

SIGNED AND SWORN (OR AFFIRMED) to before me on \_\_\_\_\_, 20\_\_\_\_  
by \_\_\_\_\_.

\_\_\_\_\_  
Notary Public for the State of \_\_\_\_\_  
Printed name of notary \_\_\_\_\_  
Title or rank: \_\_\_\_\_  
Residing at \_\_\_\_\_  
My Commission Expires: \_\_\_\_\_