| Name:<br>Address:   |
|---|
| Phone:<br>Applicant for Personal Representative   |
| MONTANAJUDICIAL DISTRICT COURT FORCOUNTY  |
| IN THE MATTER OF THE ESTATE OF ) PROBATE NO   |
| Deceased.   |
| APPLICATION FOR INFORMAL PROBATE AND APPOINTMENT OF PERSONAL REPRESENTATIVE   |
| Applicant respectfully states that:   |
| 1. Applicant is(relation to deceased)   |
| 2died on, 20 at the age of years. At the time of death, decedent was domiciled in the County, Montana.  |
| 3. The names and addresses of the spouse, children, heirs and devisees and the ages of those who are minors, so far as is known or ascertainable with reasonable diligence are:   |
| 4. The name and address of the Personal Representative of the decedent whose appointment has not been terminated is:  |
| 5. Applicant has /has not received a demand for notice and is / is not aware of a demand for notice of any probate or appointment proceeding concerning the decedent. (circle applicable - if notice know, state below.)                |
| 6. The decedent died intestate and after the exercise of reasonable diligence, the applicant is unaware of any unrevoked testamentary instrument or a statement why any such instrument of which he may be aware is not being probated. |
| 7. Applicant is entitled to be appointed as Personal Representative of decedent's estate because:   |

| DATED   |  | SIGNED   |
|---|--|--|
|   |  | Applicant  |
| S. C. M.  |  |  |
| State of Montana  | )<br>:ss                                 |  |
|   | ,00                                      |  |
| county of, b  | )<br>being first duly sworn, up          | pon oath, deposes and says:  |
| , b   | oing and that the facts a                | pon oath, deposes and says:<br>and matters contained therein are true and comple         |
| , b That he/she has read the forego                               | oing and that the facts a                | pon oath, deposes and says: and matters contained therein are true and comple  Applicant |
| , b That he/she has read the forego                               | oing and that the facts a<br>and belief. | and matters contained therein are true and comple  Applicant                             |
| , b That he/she has read the foregouthe best of his/her knowledge | oing and that the facts a<br>and belief. | and matters contained therein are true and comple  Applicant                             |

| Name:<br>Address  | s:   |  |  |  |
|-------------------|--|--|--|--|
| Phone:<br>Applica | ant for Personal Representative  |  |  |  |
|                   | MONTANAJUDICIAL DISTRICT COURT FORCOUNTY   |  |  |  |
| IN TH             | E MATTER OF THE ESTATE OF  ) PROBATE NO ) Deceased.  |  |  |  |
|                   | ,  |  |  |  |
|                   | ORDER OF INFORMAL PROBATE AND<br>APPOINTMENT OF PERSONAL REPRESENTATIVE                                |  |  |  |
|                   |  |  |  |  |
| The ap            | plication of for the informal appointment as Personal Representative,                                  |  |  |  |
| it appe           | aring that the application is complete and contains the applicant's oath that the statements contained |  |  |  |
| therein           | are true to the best of his/her knowledge and belief, the Court makes the following findings based     |  |  |  |
| upon s            | aid application:   |  |  |  |
| 1.                | , 20, and at least 120 hours have  |  |  |  |
|                   | elapsed since decedent's death.  |  |  |  |
| 2.                | The applicant is an interested person  |  |  |  |
| 3.                | ·  |  |  |  |
| 4.                | Venue is proper.   |  |  |  |
| 5.                | The original, duly-executed, and apparently unrevoked Will of decedent is in the Court's               |  |  |  |
|                   | possession and appears to be valid in all respects.  |  |  |  |
| 6.                | Any notice required has been given.  |  |  |  |
| 7.                | The time limit for probate has not expired.  |  |  |  |
| 8.                | A Personal Representative has not been appointed in this or any other county of this state.            |  |  |  |
| 9.                | has priority under the law which entitles him to act as Personal                                       |  |  |  |
|                   | Representative of the decedent's estate for the reason stated in the application.                      |  |  |  |

NOW THEREFORE, IT IS ORDERED as follows:

|                            | is appointed as Personal Representative of the estate of the deceden |
|----------------------------|--|
| without bond.              |  |
| Letters shall be issued to | upon qualification and acceptance.                                   |
|                            |  |
|                            | upon quantication and acceptance.                                    |

| Name:<br>Address:                                  |   |
|--|---|
| Phone: Personal Representative                     |   |
|  | UDICIAL DISTRICT COURTCOUNTY  |
| IN THE MATTER OF THE ESTATE OF  Deceased.          | PROBATE NO  |
|  | TTERS   |
|  | as Personal Representative of said estate, by order in  |
| the above proceeding dated                         |   |
| Letters of appointment as such Personal Re         | presentative are hereby issued as provided by law.  |
| WITNESS the Clerk of Court above named of, 20      | and the seal of the Court affixed thisday   |
|  | Clerk of Court  |
|  | B Y   |
| State of Montana ) :SS county of )                 |   |
| I,, hereby accept the du , deceased, and do solemi | ties of Personal Representative of the estate of nly swear that I will perform, according to law, the |
| duties of Personal Representative of the estate.   |   |
|  | Personal Representative   |
| Subscribed and sworn to before me thisday          | y of  |
|  | Clerk of Court  |
|  | B y<br>Deputy Clerk   |

| Name:<br>Address:  |                |
|--------------------|----------------|
| Phone:<br>Personal | Representative |
|                    |                |

| MONTANA FOR                    | JUDICIAL DISTRICT COUR'I COUNTY |           |
|--------------------------------|---------------------------------|-----------|
| IN THE MATTER OF THE ESTATE OF | )<br>) PF                       | ROBATE NO |
| Deceased.                      | ý                               |           |

## PERSONAL REPRESENTATIVES SWORN STATEMENT TO CLOSE ESTATE

| , the Persona | l Representative of | f the above-name | d estate, states t | that: |
|---------------|---------------------|------------------|--------------------|-------|
|---------------|---------------------|------------------|--------------------|-------|

- 1. He/She is the duly appointed, qualified and acting Personal Representative of the abovenamed estate.
- 2. He/She has published Notice to Creditors as provided in M.C.A. 72-3-801 and the time limitation for presentation of creditors' claims has expired.
- 3. He/She has 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, inheritance and other death taxes.
- 4. He/She has 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.

## (ATTACHMENT)

- 5. He/She has sent a copy of this statement to all distributees of the estate and to all creditors or claimants of the estate of whom he/she is aware whose claims are neither paid nor barred, and he/she has furnished a full account in writing of his/her administration to the distributees, whose interests are affected thereby. (OR The sole residual distribute is the same person as the Personal Representative and therefore, no accounting is required.)
  - 6. There has been tiled with the Clerk of Court:
    - ( ) A certificate from the Department of Revenue stating that no inheritance taxes are due

| () A certificate from the Department of Revenue from the County Treasurer stating that any inherits | <u> </u>   |
|---|--|
| (Where appropriate, add a statement that cash in the amount of                                      | \$was withheld in a contingency  |
| fund for payment of inheritance tax, estate tax or income tax de                                    | eficiencies.)  |
| 7. This statement is filed for the purpose of closing   | this estate and terminating the appointment  |
| of the undersigned pursuant to M.C.A. 72-3-1004.  |  |
| DATED this day of, 20   |  |
|   | Name, Personal Representative  |
| State of Montana ) :ss county of )  |  |
|   | •  |
|   | Notary Public for the State of Montana.  Residing at , Montana.  My Commission expires |