

IN THE MATTER OF THE ESTATE OF

DECLARATION OF NO PROBATE

Deceased.

Case No: _____

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

2. The decedent's

a. Post-office address was:

_____.

b. Date of death was: _____.

c. Date of birth: _____.

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

4. I am (check all that apply):

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: _____

I declare under the criminal penalty of false swearing that the information I have provided is true and accurate.

Signature

Name printed/typed

Street address

City, State, and Zip Code