

THE STATE OF NEW HAMPSHIRE
JUDICIAL BRANCH
<http://www.courts.state.nh.us>

Court Name: _____
Case Name: Estate of _____
Case Number: _____
(if known)

STATEMENT OF VOLUNTARY ADMINISTRATION

ESTATE ASSETS AND INCOME (List personal estate assets as reported on Voluntary Administration Affidavit and income earned on estate assets.)

A. _____ \$ _____
B. _____ \$ _____
C. _____ \$ _____

1. TOTAL ESTATE ASSETS AND INCOME	\$ _____
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BILLS PAID FROM ESTATE ASSETS AND INCOME (List only expenses paid from estate assets reported on Voluntary Administration Affidavit and income earned on estate assets.)

A. Funeral expenses and last sickness \$ _____
B. Other bills paid such as debts, taxes and estate expenses \$ _____
(List each specific bill and amount below.)

2. TOTAL BILLS PAID FROM ESTATE ASSETS AND INCOME EARNED	\$ _____
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3. BALANCE IN HAND TO BE DISTRIBUTED TO LEGATEES OR HEIRS ONLY AFTER RECEIVING THE COURT'S APPROVAL	\$ _____
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I, _____, Voluntary Administrator of the estate, state the above is a true and accurate statement of my administration.

I certify that on this date I provided this document(s) to the parties who have filed an appearance for this case or who are otherwise interested parties by: ☐ Hand-delivery OR ☐ US Mail OR ☐ Email (E-mail only by prior agreement of the parties based on Circuit Court Administrative Order).

Date

Voluntary Administrator Signature
(must be signed in presence of notarial officer)

State of _____, County of _____

This instrument was acknowledged before me on _____ by _____
Date Voluntary Administrator

My Commission Expires _____
Affix Seal, if any

Signature of Notarial Officer / Title

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STATEMENT OF VOLUNTARY ADMINISTRATION

ORDER

☐ This statement is approved.

☐ This statement is disapproved.

Date

Judge