

SAMPLE

SMALL ESTATE AFFIDAVIT
Collection of Personal Papers for
Instruments Filing List
Wyoming Statutes Title 2, Chapter 3, Art. 1
Section 2-1-2 through 2-1-20 inclusive
Contract No. 1-ET10

STATE OF WYOMING)
) s.s.
COUNTY OF _____)

IN THE DISTRICT COURT
_____ JUDICIAL DISTRICT
No. _____

In the Matter of the Estate of)
)
_____)
)
Decedent.)

AFFIDAVIT OF SMALL ESTATE
DISTRIBUTEES

I, _____, upon duly sworn statement in my oath, on behalf of myself and all other distributees, that:

1. My mailing address:

Street Address

City, State

Zip Code

My residence address is:

Street Address

City, State

Zip Code

2. The decedent's full name is:

3. More than thirty (30) days have elapsed since decedent's death . The date of the decedent's death was _____. I have attached a copy of the death certificate hereto.

4. I am a distributee of the decedent estate as defined in Wyoming Statutes 2-1-301(XIII). All distributees of the decedent, including myself, are listed as follows:

Surviving Spouse:

Address: _____
City: _____
State: _____
Zip code: _____

Relationship: _____
Name _____
Address: _____
City: _____
State: _____
Zip Code: _____
DOB: (minors only) _____

Relationship: _____
Name _____
Address: _____
City: _____
State: _____
Zip Code: _____
DOB: (minors only) _____

Relationship: _____
Name _____
Address: _____
City: _____
State: _____
Zip Code: _____
DOB: (minors only) _____

Relationship: _____
Name _____
Address: _____
City: _____
State: _____
Zip Code: _____
DOB: (minors only) _____

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Relationship: _____
Name _____
Address: _____
City: _____
State: _____
Zip Code: _____
DOB: (minors only) _____

Relationship: _____
Name _____
Address: _____
City: _____
State: _____
Zip Code: _____
DOB: (minors only) _____

Relationship: _____
Name _____
Address: _____
City: _____
State: _____
Zip Code: _____
DOB: (minors only) _____

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5. That the value of the entire estate of the decedent, wherever located, less liens and encumbrances, does not exceed Two-Hundred Thousand Dollars (\$200,000.00).
6. No application or petition for the appointment of a personal representative is pending or has been granted in any jurisdiction.
7. The claiming distributees are entitled to payment or delivery of the property, and there are no other distributees of the decedent having a right to succeed to the property under probate proceedings.

Under penalties of perjury, I/We declare that I/We have read the foregoing and the facts alleged are true, to the best of my/our knowledge and belief.

Date: _____ Signature of Petitioner: _____

Print Name of Petitioner: _____

Street Address

City, State

Zip Code

(Area Code) Telephone No.

Relationship to Decedent

Acknowledgment

STATE OF WYOMING

COUNTY OF _____

The foregoing instrument was acknowledged before me this _____
(date) by _____.

(Seal)

Notary Public

Printed Name

My Commission Expires: _____

SAMPLE

STATE OF WYOMING)
) s.s.
COUNTY OF _____)

IN THE DISTRICT COURT
_____ JUDICIAL DISTRICT
No. _____

In the Matter of the Estate of)
)
_____)
)
Decedent.)

AFFIDAVIT OF SMALL ESTATE
CREDITOR

I, _____,
upon duly sworn, state on my oath, [on behalf of myself and other creditors], that:

1. My business/ mailing address:

Street Address

City, State

Zip Code

My residence address is:

Street Address

City, State

Zip Code

2. The decedent's full name is:

3. More than thirty (30) days have elapsed since decedent's death. The date of the decedent's death was _____. I have attached a copy of the death certificate hereto.

4. I am a creditor of the decedent owed a debt at the time of death or which would be owed if the estate was being administered upon.

OR

I file this affidavit in my capacity as _____, and on behalf of _____, a creditor of the decedent owed a debt at the time of their death or which would be owed if the estate was being administered upon.

5. That the value of the entire estate of the decedent, wherever located, less liens and encumbrances, does not exceed Two-Hundred Fifty Thousand Dollars (\$200,000.00).

6. That no application or petition for the appointment of a personal representative is pending or has been granted in any jurisdiction.

7. To the best of my knowledge, no affidavit pursuant to W.S. 2-1-201, in connection with the decedent, has been presented to any party referred to in W.S. 2-1-201.

8. The claim is based upon: _____
The amount claimed is: _____
Total Payments to date: _____

9. I, or the party that I represent, fully and knowingly:
(A) Waive any immunity from suit or level of execution I/We might otherwise have;
(B) Agree to indemnify and hold harmless from all claims whatsoever any party delivering assets on the basis of such affidavit, to the extent of the full value of the assets so delivered;
(C) Is answerable and accountable to a personal representative of the estate, if appointed, or any other person or party having a superior right.

Under penalties of perjury, I/We declare that I/We have read the foregoing and the facts alleged are true, to the best of my/our knowledge and belief.

Date: _____ Signature of Petitioner: _____

Print Name of Petitioner: _____

Street Address

City, State

Zip Code

(Area Code) Telephone No. _____

Relationship to Decedent _____

Individual Acknowledgement

STATE OF WYOMING

COUNTY OF _____

The foregoing instrument was acknowledged before me this (date) by _____

(Seal)

My Commission Expires: _____
My Name _____
My Title _____



My Commission Expires: _____

Individual Acknowledgement

STATE OF WYOMING

COUNTY OF _____

The foregoing instrument was acknowledged before me this (date) by _____, as _____ of _____

(Seal)

Notary Public _____

Printed Name _____

My Commission Expires: _____