File #_____ Date:_____

CHECKLIST FOR THE PERSONAL REPRSENTATIVE: INFORMAL PROBATE

1. **Proof of Publication**

The Daily Reporter will mail to you a proof of publication, which is an affidavit of the newspaper publisher. This piece of white paper with a newspaper clipping attached to it must be filed with the Probate office. We do not need the invoice or payment receipt.

If you do not use the daily reporter, then you are required to provide the Notice to Creditors (PR 1804) directly to that newspaper and you will be required to file an affidavit of mailing with a proof of publication from that newspaper with the Probate Office.

2. **Claims and Judgment on Claims (PR-1909)**

Creditors have until_____to file a claim against the estate (which is 95 days). The case docket can be reviewed via the internet or with the Probate office, which will show if any claims are filed.

a. IF THERE ARE NO CLAIMS: Submit the Judgment on Claims (PR-1909) after the above date and after submitting the proof of publication.
b. IF THERE ARE CLAIMS: You are required 1) to pay those claims and obtain a receipt or 2) to object to the claims and have the matter resolved within the Court system.
c. IF YOU PAY CLAIMS WITHOUT OBJECTION: If you pay the claims and have signed receipts (PR-1815) for the satisfaction of the claims, then submit the Judgment on Claims (PR-1909) after the above date and after submitting the proof of publication.
d. IF YOU OBJECT TO THE CLAIM(S): You must file a Demand for Formal Probate (PR-1813) and a written objection referencing the specific claim and the specific reason for the objection with the Probate office. Additionally, you are required to send a copy of the objection to the claimant and to prepare an Affidavit of Mailing (PR-1817), which you must bring to the court hearing. You will receive, by mail, a Notice of Hearing from the Probate office. You MUST attend the hearing or your objection can be dismissed.

3. **Inventory (PR-1811)**

On or before_____, you must file a probate inventory (PR-1811). A notary public must witness your signature and sign and seal the form.

The statutory filing fee **payable to Milwaukee County** is required at the time the Inventory is filed. The filing fee is .2% and can be determined by multiplying .002 times the net value of the assets listed on the front of the inventory. A copy of this inventory must be sent to all of the Interested Persons.

Inventories shall contain the property subject to probate administration listed with the DATE OF DEATH VALUE, which includes ALL real estate and personal property. Generally, *tangible* personal property with nominal value, such as clothes or household contents etc do not need to be included, although things like collectibles, art, antiques would have independent value and must be included.

4. **Closing Certificate for Fiduciaries (Wisconsin Department for Revenue)**

This is not a Court form! You must apply for a closing certificate by filing taxes with the Wisconsin Department of Revenue. Even if your estate does not otherwise require the filing of taxes, you must file a Form 2 and Schedule CC to get a closing certificate. Schedule CC requires that a copy of the Will (if applicable) and a copy of the filed Probate Inventory (PR-1811) be filed with the Wisconsin Department of Revenue with the CC form.

Contact Information for the Wisconsin Department of Revenue is: www.revenue.wi.gov or (608) 266-2772 or 818 N. 6th Street, Room 408, Milwaukee, WI 53203, (414) 227-4000.

5. **Final Account (MUST PREPARE, BUT NOT REQUIRED TO FILE)**

Informal probate procedure does not require that the PR file a final account. However, you must swear, under oath, that you have provided a final account to all of the Interested Persons. This account should, at least, contain the starting amount, any and all costs of the administration, disbursements, additions and proposed distributions. You may use Final Account (PR-1814) as a reference tool or as your form.

6. **Receipts from Beneficiaries or Heirs (PR-1815)** _____

A statement from EVERY beneficiary under the Will (or heir at law, if no will) is required to verify that s/he received everything s/he is entitled to. You, as the PR, are required to transfer all of the assets from the estate to the correct beneficiaries/heirs. For example, if there is real estate, then you must transfer it out of the estate via a Personal Representatives Deed (WI form 5-2003).

7. **Personal Representative's Statement to Close (PR-1816)**

This form must be completes and filed on or before _____. You must be done with everything else, before you complete and file this form. The Probate office will not accept this form until all of the other procedural requirements have been met. Read each paragraph and make sure you have followed all of the requirements. This statement must be SIGNED and SWORN to in front of a notary public.

General Information

- Originals must be filed with the Probate office, copies will not be accepted. The Probate office cannot accept documents by fax or email.

- Using www.wicourts.gov, you can check the status of your case, including whether claims have been filed (Dropdown menu: case search: circuit court) or download/print blank probate forms (Dropdown menu: Forms: probate: informal).

- Milwaukee County, Office of the Register in Probate (Mon-Fri: 8:00am - 4:30pm)
901 N. 9th Street, Room 207, Milwaukee, WI 53223 Telephone: 414.278.4444
Website: http://www.county.milwaukee.gov/CourtServices7714/ProbateHomePage.htm

- SS-4 (for obtaining an EIN for the estate): www.irs.gov (online or print SS-4 application)

STATE OF WISCONSIN, CIRCUIT COURT, _____ COUNTY

For Official Use

IN THE MATTER OF THE ESTATE OF

_____

_____

Judgment on Claims
(Formal Administration)

Case No. _____

☐ There are no claims filed.
☐ The court enters judgment on claims as follows:

Name of Claimant	Amount of Claim	Decision on Claim

The personal representative shall pay the allowed claims by _____.
Date

BY THE COURT:

Name of Attorney	
Address	
Telephone Number	Bar Number

_____
Signature of Circuit Court Judge/Court Commissioner

_____
Name Printed or Typed

_____
Date

This form shall not be modified. It may be supplemented with additional material.

STATE OF WISCONSIN, CIRCUIT COURT, _____ COUNTY

For Official Use

IN THE MATTER OF THE ESTATE OF

_____

_____

Inventory

☐ **Informal**
☐ **Formal**

Case No. _____

As personal representative, I certify to the best of my knowledge that this Inventory with schedules includes:

1. All property subject to administration.
2. A statement of any encumbrance, lien or other charge upon each item.
3. Identification of marital property, if any.

I further certify that I shall furnish a copy of this inventory to all persons interested as required by law.

_____
Signature of Personal Representative

Subscribed and sworn to before me
on _____

_____
Notary Public/Court Official

My commission expires: _____

_____
Signature of Co-personal Representative

Subscribed and sworn to before me
on _____

_____
Notary Public/Court Official

My commission expires: _____

SUMMARY OF PROPERTY **(Value of Decedent's Interest at date of Death)**	Date of Death

PROPERTY SUBJECT TO ADMINISTRATION

Total value of property Subject to Administration $ _____

Minus total value of encumbrances, liens or other charges upon each item ($ _____)

Net Value of Property Subject to Administration

$ _____

On attached schedules indicate marital property with an *.

Note: A statutory filing fee shall accompany this form.

Name of Attorney

_____

Address

Telephone Number Bar Number

_____

Number	**Supporting Inventory Schedules** (Description of property, legal description of real estate, related encumbrances, liens or other charges upon each item. **Indicate marital property with an *.**)	Value of Decedent's Interest at Date of Death on _____

STATE OF WISCONSIN, CIRCUIT COURT, _____ COUNTY

For Official Use

IN THE MATTER OF THE ESTATE OF

_____

_____

Estate Receipt

☐ **Informal**

☐ **Formal**

Case No. _____

1. I have received from the ☐ personal representative ☐ special administrator of this estate the following:

This is:

☐ 2a. A partial payment of my share of the estate.

☐ 2b. Full payment of my share of the estate.

☐ 3. Full satisfaction of my claim.

☐ 4. Distribution of funds to trust _____ (Identify Trust).

☐ 5. Other: _____.

_____
Signature

_____
Name Printed or Typed

_____
Address

_____

_____
Date

Name of Attorney	
Address	
Telephone Number	Bar Number

This form shall not be modified. It may be supplemented with additional material.

STATE OF WISCONSIN, CIRCUIT COURT, _____ COUNTY		For Official Use
IN THE MATTER OF THE ESTATE OF _____ _____	**Personal Representative's Statement to Close Estate (Informal Administration)** Case No. _____	

I state that I, or a prior personal representative whom I have succeeded, have:

1. Given notice to interested persons and to creditors as required by law and that the time for filing claims has expired prior to the date of this statement.
2. Inventoried the assets of the estate and furnished a copy of the inventory to interested persons.
3. Fully administered the above estate by making payment, settlement, or other disposition of all claims presented, expenses of administration, reasonable funeral and burial expenses, death and other taxes, except as specified below, and furnished a full account, in writing to all persons whose interests are affected.
4. Sent a copy of this statement to all distributees of this estate and to all creditors or other claimants of whom I am aware, whose claims are neither paid nor barred, and distributed the assets to the persons entitled to them.
5. Paid attorney fees of $ _____.
6. Listed below, unpaid claims, expenses or taxes and detailed arrangements which have been made to accommodate them: ☐ None ☐ See attached.

Signature of Personal Representative	Signature of Co-personal Representative
Name Printed or Typed	Name Printed or Typed
Address	Address
Subscribed and sworn to before me on _____ _____ Notary Public/Court Official My commission expires: _____	Subscribed and sworn to before me on _____ _____ Notary Public/Court Official My commission expires: _____

If no other proceedings challenging this statement or otherwise involving the personal representative are pending in the court 6 months after this statement is filed, appointment of the personal representative terminates.

Name of Attorney	
Address	
Telephone Number	Bar Number