

STATE OF WISCONSIN, CIRCUIT COURT, _____ COUNTY

IN THE MATTER OF THE ESTATE OF

Amended

Name _____

Domiciliary Letters

Informal Administration

Formal Administration

Case No. _____

To: _____

The decedent, with date of birth _____ and date of death _____, was domiciled in _____ County, State of _____.

You are granted domiciliary letters with general powers and duties of a personal representative.

You are authorized to administer the estate as required by law.

Other: _____

Form completed by: (Name)	
Address	
Telephone Number	Bar Number (If any)