

STATE OF WISCONSIN, CIRCUIT COURT, \_\_\_\_\_ COUNTY

IN THE MATTER OF THE ESTATE OF

Amended

**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: \_\_\_\_\_

*(SEAL)*

**LETTERS ISSUED BY:**

\_\_\_\_\_  
Circuit Court Judge/Circuit Court Commissioner/Probate Registrar

\_\_\_\_\_  
Title (Print or Type Name if not eSigned)

\_\_\_\_\_  
Date

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