

<p style="margin: 0;">In the Matter of the ESTATE OF</p> <p style="margin: 0;">_____, Deceased.</p>	<p>)</p> <p>)</p> <p>)</p> <p>)</p> <p>)</p> <p>)</p> <p>)</p> <p>)</p> <p>)</p>	<p style="margin: 0;">Case No.: _____</p> <p style="margin: 10px 0 0 0;"><b>INVENTORY OF PROPERTY AND KNOWN DEBT</b></p> <p style="margin: 0;"> <input type="checkbox"/> Original                                  <input type="checkbox"/> Supplement       </p>
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☐ Check here if extra asset pages are attached. **Sub-Total**



### **Certificate of Service**

[This document must be given to all people with a right to object to the proposed distribution. Normally that includes all persons named in the will, all persons entitled to inherit if there is no will, and creditors.]

I certify that on \_\_\_\_\_ a copy of this Accounting was

☐ mailed

☐ hand delivered to

[list everyone served and attach extra pages if necessary.]:

<input type="checkbox"/> _____	<input type="checkbox"/> _____
<input type="checkbox"/> _____	<input type="checkbox"/> _____
<input type="checkbox"/> _____	<input type="checkbox"/> _____
<input type="checkbox"/> _____	<input type="checkbox"/> _____

**Your signature:** \_\_\_\_\_