STATE OF WISCONSIN, CIRCUIT COURT, _____ COUNTY

IN THE MATTER OF THE ESTATE OF

_____
Name

_____

☐ Amended

Inventory

☐ **Informal Administration**

☐ **Formal Administration**

Case No. _____

I DECLARE THAT:

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

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

I will furnish a copy of this inventory to all persons interested as required by law.

SUMMARY OF PROPERTY SUBJECT TO ADMINISTRATION (Value of Decedent's Interest on date of death)	Date of Death	
Total value of property subject to administration	$	
Minus total value of encumbrances, liens or other charges against each item of property	($	)
Net Value of Property Subject to Administration (cannot be less than $0)	$	

Provide itemized lists on attached schedules and clearly designate any marital property interests.

NOTE: A statutory filing fee must accompany this form.

I declare under the criminal penalty of false swearing that the information I have provided is true and accurate.

▶ _____
Personal Representative

_____
Name Printed or Typed

_____
Address

_____
Email Address Telephone Number

_____
Date State Bar No. (if any)

I declare under the criminal penalty of false swearing that the information I have provided is true and accurate.

▶ _____
Personal Representative

_____
Name Printed or Typed

_____
Address

_____
Email Address Telephone Number

_____
Date State Bar No. (if any)

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

Number	**Supporting Inventory Schedules** (Description of property including digital property as defined under §711.03(10), Wis. Stats., legal description of real estate, and related encumbrances, liens or other charges against each item.) **Clearly designate marital property.**	**Value of Decedent's Interest on Date of Death**