
Date

Signature of Personal Representative

Printed Name

Address Line 1

Phone Number

Address Line 2

E-mail Address

Verification

I swear or affirm that I read this entire document and believe that all of the statements made in the document are true.

Personal Representative's Signature

Subscribed and sworn to or affirmed before me at _____, Alaska
on _____
(date)

(SEAL)

Clerk of Court, Notary Public, or other person
authorized to administer oaths.
My commission expires: _____

Certificate of Service

[A copy of this Statement and a copy of the accounting must be given to all persons who received something in the estate or had claims against the estate.]

I certify that on _____ a copy of this Statement 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: _____