**AFFIDAVIT OF COLLECTION AND DISTRIBUTION OF**

 **DECEDENT’S PERSONAL PROPERTY**

The undersigned, being first duly sworn, on oath depose[s] and state[s] that [I am/we are] making this affidavit pursuant to Wyo. Stat § 2‑1‑201, on behalf of [myself/ourselves] as distributee[s], as hereinafter set forth, and that [I/we] make the following statements in connection therewith:

1. That [Decedent's Name], died on or about [date of death], in [city of death] [county of death], [state of death], and was a resident of [city], [county of residence], [state of residence], at the time of [his/her] death; that said decedent died [testate/intestate]; that [I am/we are] the sole and only [party/parties] entitled to the property of the decedent pursuant to [his/her] Last Will and Testament dated [date of Will][Alternatively, that I am/we are the sole and only party/parties entitled to the property of the decedent pursuant to the laws of intestate succession in the State of Wyoming].

2. That the value of the entire estate, located in Wyoming, or otherwise subject to probate administration in this state, less liens and encumbrances, does not exceed Two Hundred Thousand Dollars ($200,000.00).

3. That more than thirty (30) days have elapsed since the date of death of the decedent.

4. That no application for the appointment of a personal representative is pending or has been granted in any jurisdiction in the State of Wyoming.

5. That [no application for appointment of a personal representative has been made in a jurisdiction outside of the State of Wyoming.]/[if an application for appointment of a personal representative has been made in a jurisdiction outside of the State of Wyoming:

(a) The name and address of the proposed or appointed personal representative, the date of the application and the date of any appointment; and

 (b) The title of the proceedings and name of the court and jurisdiction in which the application was made.]

6. That the claiming distributee[s] [is/are] entitled to payment or delivery of the property described below; that the distributee[s] [is/are] the surviving [relationship to decedent] of the decedent; [insert (if applicable) facts concerning the distributee[’s/s’] relationship to the decedent and concerning the legal basis upon which the distributee[s] claim[s] entitlement to such property, including facts regarding any intervening estates or other parties who may have a claim of entitlement from the decedent and from whom the applicant distributee[s] claim[s];] and that there are no other distributees of the decedent having a right to succeed to the property under probate proceedings in any jurisdiction.

7. That the property that is the subject of this Affidavit is described as follows:

(a) [For bank account][name of bank][city, state][account number (last three or four digits)]

(b) [For motor vehicle][year][make][model][VIN#]

(c) [For checks][individual/entity check is from][check #][$ amount]

(d) [For stock][number of shares][name of entity][stock certificate #]

(e) [For life insurance][insurer][policy #]

(f) [For pension plan][name][any other applicable description]

(e) [Any and all other personal property of the decedent and all accounts held by the decedent now know or hereafter discovered.]

8. The undersigned request[s] that the remaining balances in said bank account[s] be distributed to and the titles to said motor vehicles be transferred to \_\_\_\_\_\_\_\_\_\_\_\_\_\_.

9. The undersigned request[s] that said [name of entity issuing check] check be distributed to and negotiated by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

10. The undersigned request[s] that the [life insurance proceeds/pension plan proceeds] payable under the above-mentioned [life insurance contract/pension plan] be distributed to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; that the decedent's interest in the title to said \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ be transferred to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; and that the decedent's interest in the title to said \_\_\_\_\_\_\_\_\_\_\_\_\_\_ be transferred to \_\_\_\_\_\_\_\_\_\_\_.

DATED this \_\_\_\_ day of\_\_\_\_\_\_\_, 20--.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[DISTRIBUTEE]

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[DISTRIBUTEE]

STATE OF WYOMING )

) ss:

COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_ )

The above and foregoing instrument was subscribed, sworn and acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_\_, 20\_\_, by [Distributee's Name].

WITNESS my hand and official seal.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Notary Public

My Commission Expires:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_