

IN THE SUPERIOR COURT FOR THE STATE OF ALASKA
 AT _____

In the Matter of the Estate of: _____)
 _____)
 _____)
 _____)
 _____)
 Person Who Died (Decedent) _____)
 Date of Birth: _____)

CASE NO. _____

SWORN STATEMENT OF PERSONAL REPRESENTATIVE CLOSING SMALL ESTATE

- 1. Personal Representative.** I am the personal representative of this estate.
- 2. Estate Value.** To the best of my knowledge, the value of the entire estate, after subtracting liens and debts, is not more than the combined total of the following:
 - homestead allowance;
 - exempt property;
 - family allowance;
 - costs and expenses of administration;
 - reasonable funeral expenses; and
 - reasonable and necessary medical and hospital expenses of the decedent’s last illness.
- 3. Duties.** I performed the following duties: *[You must check all of the following boxes.]*
 - Distributed the assets of the estate to the persons entitled.
 - Sent a copy of this statement to all persons or creditors who received estate property, and to all interested persons whose claims were unpaid.
 - Sent an accounting to all persons who received estate property or whose interests are affected. *[If individuals waived their right to receive an accounting, you must file the waivers with this document.]*
- 4. Closing Statement.** I am filing this statement to close this estate. I understand that my appointment as personal representative will end in one year as long as no action or proceeding involving me as personal representative is pending in the court. I will remain the personal representative until that time.

Date

Signature of Personal Representative

Print or Type Name

Address Line 1

Phone Number

Address Line 2 (City, State, ZIP)

E-mail Address

****Attach *Order Closing Estate* (form P-301) to the original copy of this statement that you file with the court. Only fill out the top portion (case caption) of P-301—leave the rest for the court to fill out.****

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 _____.

(SEAL)

Court clerk, 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 _____ at _____ *[date/time]* a copy of this Statement was

mailed hand-delivered emailed to:

[list everyone served; 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: _____