IN THE CHANCERY COURT FOR ROBERTSON COUNTY, TENNESSEE
AT SPRINGFIELD

IN RE: THE ESTATE OF	**)**	
	)	
_____	**)**	**DOCKET NO: _____**
DECEDENT	**)**	

PERSONAL REPRESENTATIVE STATEMENT
PER T.C.A. §30-2-601(b)(1)(A))

I, _____,
Personal Representative of this estate, as evidenced by my signature below, whether notarized or signed under the penalty of perjury, pursuant to T.C.A. §30-2-601, declare the following: That the estate is solvent; that the estate has been properly administered; I have paid or settled all claims that were lawfully presented; that I have paid all expense of administration; I have mailed or delivered notice of the requirement to file claims, as prescribed in T.C.A. §30-2-306(d), to the creditors of the Decedent who were known to or reasonably ascertainable; for estates where the death occurred prior to January 1, 2016, I have filed with the Court a final receipt from the Department of Revenue unless waived pursuant to T.C.A. §67-8-409(g) through the filing of an affidavit; I have filed a release from the TennCare Bureau pursuant to T.C.A. §71-5-116, or I have stated that the Decedent did not attain the age of fifty-five (55); I have distributed the estate according to the will and obtained and filed receipts for specific bequests as required by T.C.A. §30-2-707, or I have distributed the estate according to the laws of intestate succession; and I have obtained and filed acknowledgements from the distributees of the residue of the estate acknowledging that the estate has been properly distributed to them.

This_____ day of _____, 20 _____.

PRINT NAME: _____

ADDRESS: _____
_____
_____

I certify under penalty of perjury that the foregoing is true and correct

OR

STATE OF: _____
COUNTY OF: _____

_____
Signature

***Address:* _____**
_____
_____

Sworn to and subscribed before me this _____ day of _____, 20____.

***Notary Public*_____**
My Commission Expires: _____