

STATE OF CONNECTICUT
COURT OF PROBATE
[Type or print in ink.]



TO: COURT OF PROBATE,		DISTRICT NO.
ESTATE OF		
, DECEASED		
FIDUCIARY'S NAME	POSITION OF TRUST	

The fiduciary hereby exhibits this account to said court for allowance and represents that the same is a true and complete account of all assets of the estate and the fiduciary's receipts, payments and distributions.

The fiduciary represents that: all claims allowed against said estate have been fully paid; there are no claims now outstanding against the estate; and there are no heirs nor distributees other than those listed in the Petition for Administration or Probate of Will, or in the schedule of proposed distribution.

The fiduciary, therefore, petitions for an ascertainment of heirs and distributees and an order of distribution in accordance with the schedule of proposed distribution attached hereto.

[For simple estates, a Financial Report, PC-246, may be filed. For other estates, use this sheet for summation only and attach appropriate schedules. Attach Affidavit of Heirs, if required by the court.]

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THIS ACCOUNT CONSISTS OF PAGES.

The representations contained herein are made under the penalties of false statement.

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Fiduciary:

CERTIFICATION

I certify that a copy of this account was sent to the following persons:

Name and Address

Signature of attorney for party _____

[Type or print name.]

Date: _____