

MEMORANDUM OF FACTS — PROBATE

Court File No. _____

COMMONWEALTH OF VIRGINIA

For Official Use Only

Circuit Court of _____

Estate of _____, deceased.

Decedent's date and place of death _____

Decedent died testate intestate. If testate, Decedent's will is holographic non-holographic.

Date of will _____ Date of codicil _____ holographic non-holographic

Decedent's residence address _____

If testate will admitted to probate will denied probate, because _____

How proved: self-proving affidavit attesting witness handwriting witnesses other (specify below)

Fiduciary appointed: Administrator Administrator, c.t.a. Executor Curator none other

Name of fiduciary _____

Residence Address _____

Mailing address if different _____

Name(s) of co-fiduciaries _____

Residence Address _____

Mailing address if different _____

Name of Agent for Service of Process _____ Telephone _____

Agent's address for Service of Process _____

Appointee same as requested on Probate Information Form? yes no, because _____

Appointee identifying information on Probate Information Form: verified not applicable/another appointed.

Inventory and settlement waived: no yes, because _____

Power of sale over realty: yes no. Amount of fiduciary bond: \$ _____ secured unsecured.

Surety is waived by will: yes no. Surety is waived by statute: yes, by § _____ no.

Type of surety: corporate cash property other (specify) _____

Name of corporate surety _____

Agent of corporate surety _____

Mailing address _____

Description of security _____

Clerk's additional comments:

TAX AND FEES COLLECTED

State Tax \$ _____ Bond \$ _____

Local Tax \$ _____ Certificate(s) of Qualification \$ _____

Qualification Fee \$ _____ Transfer Fee \$ _____

Record Will/Order \$ _____ State Library Fee \$ _____

List of Heirs \$ _____ Copies \$ _____

TOTAL TAX AND FEES COLLECTED \$ _____

Date: _____

By _____ Clerk/Deputy Clerk