

_____ ACCOUNT

STATE OF DELAWARE }
COUNTY OF KENT } SS.

I/We _____, Personal

Representative(s) of the Estate of _____,

deceased, being duly qualified to law, to depose and say that the foregoing account is just and true to the best of my/our knowledge and belief; and that I/we have executed my/our duties with honesty and integrity.

Personal Representative

Personal Representative

SWORN AND SUBSCRIBED before me, _____,

Notary

AND FURTHER, that I, _____, Register of Wills for Kent County, do hereby verify that I have examined the foregoing account, verified the calculations, compared the vouchers, and find the same to be correctly adjusted and settled.

Register of Wills

AND FURTHER, that on _____, _____, I mailed to the beneficiaries, at the address provided by the Personal Representative(s), a notice that said the account has been filed and would remain open for inspection and exception to any party interested for three (3) months from the date of mailing; and that no exceptions to the account have been filed as of this date,

_____, _____

Register of Wills

AND FURTHER, I (we) have read and understand the requirements for the filing of a State of Delaware Estate Tax Return as prescribed by Section 1505, Title 30, of the Delaware Code, and applicable provisions of the Internal Revenue Code related to filing of federal estate tax returns, and hereby declare that no Delaware Estate Tax Return is required to be filed on behalf of the above-named decedent.

Personal Representative

IT IS ORDERED that the foregoing account is hereby approved.

Date

Chief Deputy, on behalf of the Chancellor