

**WYOMING AFFIDAVIT OF COLLECTION OF ESTATE ASSETS**

In accordance with Wyo. Stat. Ann. §§ 2-1-201 and 2-1-202

Certified Copy of Decedent's  
Death Certificate to be attached  
To this Affidavit/Declaration

Use of this form does not constitute legal advice by any  
deputy of the County Clerk's Office. Affiant was  
advised that he/she may seek legal advice.

STATE OF WYOMING )  
 ) s s  
COUNTY OF \_\_\_\_\_ )

I, \_\_\_\_\_ (Name of person signing this affidavit)

the undersigned first being duly sworn upon oath, state:

1. I am the claiming successor of the decedent, because I am the \_\_\_\_\_ of the decedent. (describe relationship to decedent)
2. Name of the decedent: \_\_\_\_\_
3. Date of death: \_\_\_\_\_
4. State of decedent's residence at date of death: \_\_\_\_\_
5. Place of death: \_\_\_\_\_ (city and state)
6. The value of the entire estate, wherever located, less liens and encumbrances, does not exceed \$200,000.00
7. At least thirty (30) days have elapsed since the death of the decedent as shown in a certified or authenticated copy of the decedent's death certificate attached to the affidavit.
8. There are no other distributees of the decedent having a right to succeed to the property under probate proceedings.
9. No application or petition for the appointment of a personal representative is pending or has been granted in Wyoming.
10. I am entitled by law to payment or delivery of the property, and I request that the following described property be paid, delivered, or transferred to me:  
  
\_\_\_\_\_
11. All statements in this affidavit are true and correct and I acknowledge that any false statement may subject the person or persons herein claiming to penalties relating to perjury under the laws of the State of Wyoming and any other applicable law.

\_\_\_\_\_  
Signature of Affiant making the above statements  
  
\_\_\_\_\_  
Name (type or print)  
  
\_\_\_\_\_  
Address  
  
\_\_\_\_\_  
City, state, zip

Subscribed and sworn to before me by \_\_\_\_\_,  
this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public  
  
\_\_\_\_\_  
Notary Seal