STATE OF WISCONSIN, CIRCUIT COURT,			COUNTY		
IN THE MATTER OF THE ESTATE OF			☐ Amended		
			Estate Receipt		
Name			Informal Administration Formal Administration		
Case No					
1.					
	Describe items of property or monies received				
□ 2.	This is a \square partial \square full distribution of my share of the estate.				
□ 3.	This is a full satisfacti	on of the claim filed by	in the amount of \$		
4 .	. This is a distribution of funds to trust. [Identify Trust]				
☐ 5.	5. Other:				
Form completed by: (Name)					
Address			Signature		
			Name Printed	d or Typed	
Email Address			Addre	SS	
			Email Address		
Telephone Number Bar Number (If any)		Bar Number (If any)	Liliali Addless		
			Telephone Number	Date	