## 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		)	
COUNTY OF		) ss )	
I,		(Name of person signing this affidavit)	
the und	ersigned 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 a	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 e	apsed 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 t	he 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 t	o 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.		
Signatu	re of Affiant making the above sta	ements	
Name (t	ype or print)		
Addres	s		
City, sta	te, zip		
Subscr	ibed and sworn to before m	e by,	
		, 20	
	uuj or		

Notary Public