IN THE CIRCUIT COURT OF THE FIFTEENTH JUDICIAL CIRCUIT, IN AND FOR PALM BEACH COUNTY, FLORIDA PROBATE DIVISION

CHECKLIST FOR PETITION FOR SUMMARY ANCILLARY ADMINISTRATION

This checklist shall be completed and e-filed with your Petition. Please review and sign the applicable certification clause at the end of the checklist prior to submitting it with your Petition. If any of the items below are not checked, please complete "Certification B." Completing and e-filing this Checklist does not remove any additional obligations imposed by rule or statute.

| CASE | NUMBER: in Re Estate of: |
|------|---|
| | A copy or digitized copy of the death certificate (do not redact social security number) was filed. Fla. Stat. §731.103(1); Fla. Prob. R. 5.205(a), 5.171 |
| | The Petition includes a statement showing proper venue. |
| | The Petition is verified. |
| | The Petitioner submitted proof of payment of the decedent's reasonable and necessary medical bills from the last 60 days of the decedent's last illness. i |
| | OR |
| | If there are no such expenses, Petitioner has stated so in the Petition. |
| | The Petitioner submitted proof of payment in full of the decedent's reasonable funeral expenses. ⁱⁱ |
| | This is an intestate estate and the Petitioner has filed an Affidavit of Heirs OR |
| | This is a testate estate. |
| | The Petition includes: (a) the name and address of the decedent's surviving spouse (if any); (b) the names and addresses of the decedent's beneficiaries and their relationship to the decedent; (c) if any beneficiary is a minor the year of birth is included. |
| | All beneficiaries have received formal notice of the Petition and the proposed distribution; |
| | OR |
| | The Petitioner has filed notarized consents from all the beneficiaries. |
| | The Petition includes a statement describing the domiciliary or principal proceedings from another state or country, if known, and the name and address of the foreign personal representative and the court issuing letters. |
| | The Petition demonstrates the eligibility for summary administration, (i.e., the decedent died over 2 years ago or the value of the estate, less exempt property, does not exceed \$75,000). |
| | The Petitioner is a beneficiary or a person nominated as personal representative in the decedent's foreign will offered for probate. |

The Petition specifically describes the assets to be distributed, and includes values for each asset (e.g., name and address of the financial institution and the associated account number(s), legal property descriptions, etc.)

The Petition states that a diligent search for creditors was conducted and acknowledges the penalty for failing to make a diligent search.

No claims have been filed against the estate.

OR

If claims have been filed against the estate:

The creditor's claims have been stricken, or are otherwise barred by statute;

OR

Provision for payment of outstanding debt has been made to the extent that assets are available;

OR

There are insufficient assets to satisfy the outstanding claims, and formal notice of the Petition was served on the outstanding creditors.

The Petitioner filed original authenticated copies, as defined in 28 U.S.C. 1738, of the domiciliary proceedings. If testate, the authenticated copies of the domiciliary foreign proceedings include a petition for probate, an order admitting the will and/or codicils to probate, and the authority of the personal representative(s). For intestate proceedings, the authenticated copies include the domiciliary foreign petition for administration and the authority of the personal representative to act.

The proposed summary order includes the correct distribution of assets (e.g., name and address of the financial institution and the associated account number(s), legal property description, etc.).

A trust is not a beneficiary of the decedent.

OR

If a trust of the decedent is a beneficiary of the will offered for probate:

Every trustee of the decedent's trust is also a Petitioner for summary administration, and the Petitioners filed a disclosure of qualified trust beneficiaries and served each qualified beneficiary of the trust formal notice of the Petition or notarized consents.

OR

At least one trustee of the decedent's trust is not a Petitioner for summary administration.

Please complete the Certification that applies to your filing (either Certification A or Certification B). If the Petitioner is represented by counsel, only counsel must complete the applicable Certification Clause. If the Petitioners is pro se then the applicable Certification must be completed by the Petitioner.

CERTIFICATION A:

| The undersigned Petitioner ☐ (print name) |) | _/Attorney □ (print | | | | |
|---|-----------------------------------|---------------------|--|--|--|--|
| name) | certifies that he/she has reviewe | ed the information | | | | |
| necessary to support the Petition for Sumn | | | | | | |
| /Attorney □ further certifies that all the required information was previously filed or filed | | | | | | |
| • | | | | | | |
| concurrently with the Petition. The Petitioner □/Attorney □ acknowledges that the Petition will | | | | | | |
| not be reviewed by Court staff until the necessary information has been accepted into the OLS | | | | | | |
| and/or e-filing system. The Petitioner □/Attorney □ further acknowledges that a hearing may | | | | | | |
| be required to process the Petition. | | | | | | |
| | | | | | | |
| Petitioner's signature: | | | | | | |
| Signed on | 20 | | | | | |
| Signed on, | 20 | | | | | |
| OR | | | | | | |
| Attorney's signature: | | | | | | |
| Signed on, | 20 | | | | | |
| <u> </u> | | | | | | |
| | | | | | | |
| CERTIFICATION B: | | | | | | |
| The undersigned Petitioner ☐ (print name) |) | _/Attorney (print | | | | |
| name) | certifies that he/she has reviewe | ed the information | | | | |
| necessary to support the Petition for Summary Ancillary Administration. The Petitioner | | | | | | |
| /Attorney \square certifies that, after a diligent search and reasonable effort, the Petitioner \square | | | | | | |
| /Attorney \square was unable to submit the following information for the following reasons: | | | | | | |
| Auomey — was unable to submit the following information for the following feasons: | | | | | | |

| The Petitioner \square /Attorney \square acknowledge deficiency. | owledges that a h | nearing may be required concerning the |
|--|-------------------|--|
| Petitioner's signature: | | |
| Signed on | , 20 | |
| OR | | |
| Attorney's signature: | | |
| Signed on | , 20 | |
| | | |

 $^{^{\}rm i}$ Not required if the decedent has been dead for more than 2 years. $^{\rm ii}$ Not required if the decedent has been dead for more than 2 years.