Register of Wills of Washington County Pennsylvania

INVENTORY

Estate of _____ No. _____
also known as _____ Date of Death _____
_____, Deceased Social Security No. _____

Personal Representative (s) of the above Estate, deceased, verify that the items appearing in the following Inventory include all of the personal assets wherever situate and all of the real estate in the Commonwealth of Pennsylvania of said Decedent, that the valuation placed opposite each item of said Inventory represents its fair value as of the date of the Decedent's death, and that Decedent owned no real estate outside of the Commonwealth of Pennsylvania except that which appears in a memorandum at the end of this Inventory. I/We verify that the statements made in this Inventory are true and correct. I/We understand that false statements herein are made subject to the penalties of 18 Pa. C.S. Section 4904 relating to unsworn falsification to authorities.

Personal Representative:

Name of Attorney: _____ Signature _____
I.D. No.: _____ Signature _____
Address: _____ Address: _____
_____ _____
Telephone: _____ Telephone: _____
Dated: _____

Description	Value

(Attach additional sheets if necessary) Total:

Note: The Memorandum of real estate outside the Commonwealth of Pennsylvania may, at the election of the personal representative, include the value of each item, but such figures should not be extended into the total of the Inventory.