SUMMARY ASSIGNMENT CHECKLIST	CASE No.:	PR
This checklist is NOT meant to provide legal advice; it is merely a	guide that may help you thi	ough the estate
administration process.		
REQUIRED FORMS: TO BEGIN:		
(Complete)		
WILL –if not already filed with the court		
PR-1840 Petition for Summary Assignment (signature nota		
Courts" (.2% of the assets or a minimum of \$20.00 as requ	ired by §814.66, Wis. Stats	;)
PR-1806 Proof of Heirship (signature notarized)		
PR-1846 Waiver and Consent (To be signed by ALL benef	ficiaries named in the will a	and ALL heirs)
(Complete-Court will sign)		
PR-1842 Notice to Creditors (Published Notice will give 3		
If no Waivers and Consents from all beneficiaries, then in		
PR-1843 Order and Notice of Hearing Petition of Summar	y Assignment	
IF ALSO REQUESTING SPECIAL ADMINISTRATION:		
(Complete)		
PR-1807 Consent to Serve (signed by proposed Executor/F	Personal Representative)	
(Complete-Court will sign)		
PR-1853 Letters of Special Administration		
AFTER FILING OF PETITION:		
Proof of Publication From Newspaper (Newspaper will see		n to
Executor with invoice – original to be filed with Probate C	ourt)	
PR-1817 Affidavit of Service (if not filed on Waivers)		
PR-1841 Affidavit of Additional Property and/or Creditor	for Summary Assignment -	- only if
additional information not on the original Summary Assign	nment Petition. Pay any ad	ditional
filing fee due, Payable to "Clerk of Courts" (.2% of the ass	sets or a minimum of \$20.0	0 as required by
§814.66, Wis. Stats.)		
PR-1844 Order on Petition for Summary Assignment (Con	nplete-Court will sign)	
TO CLOSE SPECIAL ADMINISTRATION:		
PR-1854 Petition for Discharge of Special Administrator (s	signature notarized)	
PR-1855 Order Discharging Special Administrator (Compl	lete-Court will sign)	
PR-1815 Estate Receipt(s) (From each beneficiary for their	r distribution)	
MEDICAL ASSISTANCE (TITLE 19, MA, MEDICAID):	8867 02 Wie State Dage	ires that you notify th
Department of Health and Family Services if the deceased or the		
any of the other service or benefits that are listed on the Petition.	-	
any of the other service or benefits that are listed on the Petition.	Man the Propate Claims	Nouce of a copy of the

he Petition and Notice to Creditors by certified mail, return receipt requested, to: Department of Health and Family Services, Estate Recovery Program, P.O. Box 309, Madison, WI 53701-0309.

https://www.dhs.wisconsin.gov/forms/f1/f13033.pdf

A bond may be required before Letters are issued. This would be decided by the Court based on the value of the estate, the type of assets and the terms on the will.

CERTIFIED COPIES: If certified copies are required, the cost is \$3.00 for the certification plus \$1.00 per page to be certified. (A certified copy of a one-page document is \$4.00; a certified copy of a two-page document is \$5.00, etc.)

Please call 266-4331 for an appointment for all future conferences

PR Numbered Forms available on internet at: http://www.wicourts.gov/forms1/circuit.htm Add'l Info @ Probate Office website: https://courts.countyofdane.com/Prepare/Probate

Check the case file on internet: http://wcca.wicourts.gov Wisconsin Register in Probate website: http://www.wripa.org

SS-4 Application for Employer Identification Number-from IRS (www.irs.gov)

Special Notice regarding Obtaining an Employer ID number. The IRS does not charge any fee for issuing an Employer ID number. If you are asked to pay, you are using a third party vendor.