

STATE OF MINNESOTA

COUNTY OF _____

JUDICIAL DISTRICT
DISTRICT COURT
PROBATE DIVISION

Court File No. _____

Estate of _____,
Decedent

ACCEPTANCE OF APPOINTMENT
AS PERSONAL REPRESENTATIVE
AND OATH BY INDIVIDUAL

STATE OF MINNESOTA

COUNTY OF _____

} ss.

I, _____, residing at: _____, as a condition to receiving letters as Personal Representative in this Estate, (1) accept the duties of the office, (2) agree to be bound by the provisions of the statutes relating to the office, (3) submit to the jurisdiction of the Court in any proceeding relating to this Estate, and (4) swear that I will faithfully perform all duties of the office that I now assume to the best of my ability.

I declare under penalty of perjury that everything I have stated in this document is true and correct.
MINN. STAT. § 358.116.

Dated: _____

Signature _____

Attorney for _____
Name _____
Firm _____
Street _____
City, State ZIP _____
Attorney License No: _____
Telephone: _____
FAX: _____
Email: _____