STATEMENT IN LIEU OF SETTLEMENT OF ACCOUNT FOR DECEDENT'S ESTATE PURSUANT TO VA. CODE § 64.2-1314

Using This Revisable PDF Form

- 1. Copies Original and one copy to the Commissioner of Accounts.
- 2. Prepared by personal representative(s) of the estate and signed and sworn to in front of a notary.
- 3. Attachments
 - a. Filing fee.
 - b. Receipts for any specific bequests under the will.
- 4. Preparation details
 - a. This form is used when:
 - i. All heirs of an estate where there is no will, or all residuary beneficiaries under the decedent's will, are personal representatives of the estate;
 - ii. A minimum of 6 months have elapsed since the personal representative's qualification; and
 - iii. All debts and taxes have been paid and the entire net estate has been distributed.
 - b. This form cannot be used if the residuary beneficiary under the will is a trust.
 - c. Page two needs to be completed only if the personal representative(s) is (are) required to mail the statement under Virginia Code § 64.2-1303.

	OF SETTLEMENT	Court File I	No 1		
ACCOUNT FOR DECEI					
PURSUANT TO VIRGIN COMMONWEALTH OF VIRGINIA	NIA CODE § 64.2-1	314			
	2				
Estate of	3		5 , Deceas		
Date of death	4]	Decedent died [] with [] without a v		
Name of fiduciary	6				
Name of other fiduciary	6				
	STATEM	ENT UNDER OATH			
being placed under oath by	me, stated as follows: [Check the appl led Decedent died witho	icable alternative in Part out a will, that I/we am/ar	e the only distribute(s) of the		
[] That above-named I Decedent's estate, and that I	Decedent died with a wi	or ill, that I/we am/are the o	nly residuary beneficiary(s) of the ate,		
		•	u		
3. Specific bequests in Wil		receipts):	PEGCENTENAN OF PROVIDE		
	NAME 8		DESCRIPTION OF BEQUEST 8		
4. That six months have el	-		and affirm that (choose one):		
9 A. [] On or before the of it by first class 1303, who made were sent and the	e date of filing this Stat ss mail to every person e a written request ther he dates they were mail led to a copy of this Sta	entitled to a copy, pursua efor. The names and add ed are shown on Page 2. OR	ioner of Accounts, I(we) sent a copy ant to Virginia Code Section 64.2- resses of the persons to whom copies nia Code Section 64.2-1303 made a		
9 A. [] On or before the of it by first class 1303, who made were sent and the B. [] No person entity written request	e date of filing this States mail to every person e a written request ther he dates they were mail led to a copy of this Statherefor.	entitled to a copy, pursua efor. The names and add ed are shown on Page 2. OR	ant to Virginia Code Section 64.2- cresses of the persons to whom copies nia Code Section 64.2-1303 made a		
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Data Elements, page one

- 1. Insert the court file number.
- 2. Court name.
- 3. Name of decedent.
- 4. Date of decedent's death.
- 5. Check the appropriate box to indicate if the decedent had a will.
- 6. Names of the fiduciaries (personal representatives of the estate).
- 7. Check appropriate box to indicate if the decedent died with or without a will.
- 8. List any specific bequests in the will and the name of the persons to whom those bequests are made.
- 9. Check the appropriate box to indicate whether copies of this statement were sent to anyone who is entitled to a copy under Virginia Code § 64.2-1303. If copies were mailed please complete page two.
- 10. Signature of fiduciaries.
- 11. Location where form acknowledged.
- 12. Name of fiduciary.
- 13. Date when form was subscribed and sworn to.
- 14. Signature of notary public.
- 15. Date notary's commission expires.
- 16. Registration number of notary public.

Certificate of Mailing

	igned, do hereby certify that R DECEDENT'S ESTATE to th					
	2			2		
ecutor/Adm	inistrator		Executor/Administrator			
			E xecutor/Administrator			
	3					
Name of Recipient			Name of Recipient			
Address			Address			
City	State	ZIP	City	State	ZIP	
	Name of Recipient			Name of Recipient		
Address			Address			
City	State	ZIP	City	State	ZIP	
	Name of Recipient			Name of Recipient		
	Address			Address		
City	State	ZIP	City	State	ZIF	

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Form CC-1681

Data Elements, page two

- 1. Date copy was mailed to recipients listed.
- 2. Signatures of fiduciaries.
- 3. Name of recipient (person to whom the statement was mailed).
- 4. Recipient's address. Insert the address to which a copy of the statement was mailed.