



**DECLARATION OF OATH
OF FIDUCIARY**

Case No. _____
Court _____
County _____
Division _____

IN RE: Estate of _____
(Name of Decedent)

I, the undersigned, agree to faithfully perform the duties of the office as required by law, including but not limited to:

- a. Deposit all funds which come into my hands in a lawful depository located within this Commonwealth and provide canceled checks as may be required to prove accounts;
- b. Keep estate funds in separate estate accounts at all times during the administration of the estate;
- c. Invest all funds in a lawful manner;
- d. Make and file all required documents when due as required by law;
- e. File all tax documents as required by law;
- f. Maintain adequate insurance to reasonably protect any property that I may hold as a fiduciary; and
- g. Obey all orders of the court;

Further, I understand I am subject to removal as the fiduciary if I fail to perform the duties required of me under the laws of this state and that I am subject to possible fines, and civil and criminal penalties for improper conversion of the property that I hold as fiduciary; and if applicable, I declare that my intestate, so far as I know or believe, died without leaving a will.

Fiduciary's Signature: _____ Phone No.: _____

Name (*Printed*): _____

Address: _____

Email: _____

Subscribed and sworn to before me by _____ on _____ in the county
(name) (month/day/year)
of _____,
(county) (state)

Name/Title

For Notaries: My commission expires: _____. My notary ID number is : _____.