

**Affidavit of Intent to File a Statement in Lieu of Settlement of Account  
Pursuant to Virginia Code § 64.2-1314**

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Estate of \_\_\_\_\_ Probate File # \_\_\_\_\_

Date of death: \_\_\_/\_\_\_/\_\_\_\_\_ Date of Qualification: \_\_\_/\_\_\_/\_\_\_\_\_

Name of Personal Representative<sup>1</sup>: \_\_\_\_\_

Decedent died [  ] with [  ] without a will

**STATEMENT UNDER OATH**

I am the only distribute of the Decedent's estate, and I serve as personal representative of the estate; (all personal representatives of the estate must complete this oath)

The undersigned hereby gives notice of intent to file a statement in lieu of a final accounting for the above estate when all the prerequisites of Virginia Code Section 64.2-1314 have been met. The reason the statement cannot be filed at the present time is because:

The following specific bequests under the Will **have been paid or distributed:**

Name	Description of Bequest
_____	_____
_____	_____

(Attach additional pages as needed)

The following specific bequests under the Will **remain to be paid or distributed:**

Name	Description of Bequest
_____	_____
_____	_____

(Attach additional pages as needed)

All known charges against the Decedent's estate have been paid or that adequate assets remain for the payment of all known charges against the Decedent's estate, and

Six months have elapsed since the personal representative qualified in the Clerk's Office.

In addition to the foregoing affidavit under oath, hereby certify and affirm that (choose one):

A. [  ] A copy of this Affidavit has been mailed to all parties who requested a copy pursuant to Virginia Code §64.2-508 and the names of all such parties have been listed in the Certificate of Mailing below.

B. [  ] No person entitled to receive a copy of this Affidavit pursuant to Code Section 64.2-508 made a written request for such.

\_\_\_\_\_  
<sup>1</sup> If there is more than one personal representative for the estate, please use an additional front page(s) and attach to this document.

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**Certificate of Mailing**

I, the undersigned, do hereby certify that I have mailed a copy of the foregoing Affidavit of Intent to File a Statement in Lieu of Settlement of Account to the following individuals on this the \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

Name of recipient	Name of recipient
Street Address	Street Address
City, State, Zip	City, State, Zip

Name of recipient	Name of recipient
Street Address	Street Address
City, State, Zip	City, State, Zip

\_\_\_\_\_ Date

\_\_\_\_\_ Signature of Personal Representative

State of: \_\_\_\_\_

City/County of: \_\_\_\_\_

Subscribed and sworn to before me by \_\_\_\_\_, on \_\_\_\_\_.  
(Personal Representative's name) (Date)

\_\_\_\_\_  
Notary Public Signature and Seal

Notary Registration Number: \_\_\_\_\_

Commission expires: \_\_\_\_\_