

**LUMMI TRIBAL COURT  
LUMMI NATION, WASHINGTON**

IN RE THE ESTATE OF:

Case No.: \_\_\_\_\_ CVPB \_\_\_\_\_

\_\_\_\_\_  
Deceased

**NOTICE OF HEARING ON FINAL REPORT  
OF PERSONAL REPRESENTATIVE AND  
REQUEST FOR DISTRIBUTION**

TO: ANY HEIR, LEGATEE, DEVISEE, OR DISTRIBUTE

You are hereby given Notice that a Final Report of Personal Representative and Request for Distribution has been filed in the above-named case and that the Court shall conduct a hearing whether to approve the Report, find the estate ready to be closed, determine whether debts have been paid, adjudicate the persons who are entitled to the remainder of the estate, and order the distribution of the property to those entitled to it. Any person interested may file objections to the final report and petition for distribution, or may appear at the hearing and present objections thereto.

**Hearing date and time:** \_\_\_\_\_ **at** \_\_\_\_\_. *(The date must be at least 20 days before the Notice of Hearing is mailed.)*

Dated: \_\_\_\_\_

\_\_\_\_\_  
Personal Representative

NOTICE OF HEARING ON FINAL REPORT AND PETITION  
FOR DISTRIBUTION

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Court Form PB -14 8/30/11

Lummi Tribal Court  
2665 Kwina Road  
Bellingham, WA 98226  
(360) 312-2239

**LUMMI TRIBAL COURT  
LUMMI NATION, WASHINGTON**

IN RE THE ESTATE OF:

Case No.: \_\_\_\_\_ CVPB \_\_\_\_\_

\_\_\_\_\_  
Deceased

**AFFIDAVIT OF MAILING**

I declare under penalty of perjury under all applicable civil and criminal laws that I hand-delivered or mailed a copy of Notice of Hearing on Final Report of Personal Representative and Request for Distribution to each heir, legatee, devisee, or distributee whose names and addresses are known to me, as follows:

Name: \_\_\_\_\_

Address \_\_\_\_\_

Name: \_\_\_\_\_

Address \_\_\_\_\_

Name: \_\_\_\_\_

Address \_\_\_\_\_

Name: \_\_\_\_\_

Address \_\_\_\_\_

Name: \_\_\_\_\_

Address \_\_\_\_\_

Name: \_\_\_\_\_

Address \_\_\_\_\_

1 Name: \_\_\_\_\_

2 Address \_\_\_\_\_

3 Name: \_\_\_\_\_

4 Address \_\_\_\_\_

5 Name: \_\_\_\_\_

6 Address \_\_\_\_\_

7 Name: \_\_\_\_\_

8 Address \_\_\_\_\_

10 Name: \_\_\_\_\_

11 Address \_\_\_\_\_

12 Name: \_\_\_\_\_

13 Address \_\_\_\_\_

15 Name: \_\_\_\_\_

16 Address \_\_\_\_\_

17 Name: \_\_\_\_\_

18 Address \_\_\_\_\_

20 \_\_\_\_\_  
Date Personal Representative

22 SUBSCRIBED AND SWORN to before me  
23 this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

24 \_\_\_\_\_  
Notary Public  
25 My Commission Expires: