Estate of _____, Deceased File Number: 10-_____

Inventory

The items appearing in the following Inventory include all of the personal assets wherever situate and all of the real estate in the Commonwealth of Pennsylvania of above decedent. (PEF § 3301)

Description of Items included in Inventory (Attach additional pages as necessary)	**Valuation/Fair Market Value as of Date of Death.**
TOTAL:	

I/We _____,

Personal Representative(s) of the above referenced Estate, verify that the statements made in this inventory are true and correct. I/We understand that false cla ims herein are subject to penalties of 18 Pa C.S. Section 4904, relating to unsworn falsification to authorities.

_____ _____

Signature of Personal Representative Signature of Personal Representative