

Name: _____ # _____ PB _____

- Affidavit of Publication [ORS 113.155]
expiration date _____
- Affidavit of Mailing Notice [ORS 113.145(1)]
- DHS Notification [ORS 113.145(6)]
- OHA Notification [ORS 113.145(6)]
- Proof of Compliance [ORS 115.003(4)]
- Tax Returns/Payments [ORS 116.083 (3)(a)]
- Proof Mailing Notice of FA [ORS 116.093(3)]
notice period end date _____
waiver/consents _____
- Affidavit of Attorney Fees [UTCR 9.060]
Itemized? _____
- Fees: Atty: _____ PR: _____
- Inventory: _____
- Amended: _____
- Distribution matches will or intestacy

CLAIMS:

\$ amount	Who?	Satis? (y/n)
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Notes: _____

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