

Name of Person Filing: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, State, and Zip Code: \_\_\_\_\_  
Day/Evening Phone Number: \_\_\_\_\_  
State Bar Number (if applicable): \_\_\_\_\_  
Representing:  Self  Petitioner  Respondent

**SUPERIOR COURT OF ARIZONA  
MOHAVE COUNTY**

Case Number: \_\_\_\_\_

In the Matter of the Estate of \_\_\_\_\_

**WAIVER OF BOND**

\_\_\_\_\_  an Adult  a Minor, deceased

**THE UNDERSIGNED PERSON STATES AS FOLLOWS:**

1. I am: (check one box)
  - (only if there is no Will) an heir of the decedent's estate without a Will or
  - (only if there is a Will) person named in the decedent's Will.
2. The person who is applying to be the Personal Representative of the estate (name) \_\_\_\_\_ has estimated that the total value of the estate of the person who died is \$ \_\_\_\_\_.
3. I waive any and all bond in connection with his or her appointment as Personal Representative. I ask that the Court not require any bond in this proceeding.

**OATH OR AFFIRMATION**

STATE OF ARIZONA )  
County of Mohave )ss.

I declare under penalty of perjury that the contents of this document are true and correct to the best of my knowledge and belief.

\_\_\_\_\_  
Signature Date

Subscribed and sworn to (or affirmed) before me on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

By: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

\_\_\_\_\_  
Notary Public / Deputy Clerk