



Tiffany Moore Russell
Clerk of the Circuit and County Courts
Orange County • Florida

Probate Division

Disposition Form

Dear Sir or Madam:

Please find the attached copy of the Verified Statement for Disposition of Personal Property without Administration. Please complete this form, have it **notarized and sealed**, and return it to the address shown or appear in person and sign in front of a Deputy Clerk.

We will begin processing your request for Disposition of Personal Property without Administration upon receipt of the following documents.

1. Completed and notarized (with notary seal) Verified Statement.
2. Copies of funeral bill or receipt showing funeral expenses have been paid in full by the person petitioning. Or copy of funeral bill showing balance due, if applicable.
3. Copy of the asset. (i.e. copy bank statement, insurance policy, stock certificate, check, vehicle registration and blue book value).
4. Copy of the death certificate showing decedent's residence is in Orange County.
5. Original Will, if applicable.

*****ALL COPIES WILL BE RETAINED BY THE CLERK*****

The fee to file a Disposition of Personal Property without Administration is \$231.00 plus \$6.00 for each Authorization prepared by the clerk for each fiduciary that needs to release assets. Accepted forms of payment include cash, money order, cashier's check, personal and business checks (no starter or temporary checks accepted) and all major credit cards. Make checks payable to Orange County Clerk of Courts. You may pay with a credit card when present at our office. A \$3.99 surcharge applies to all credit card transactions.

For further information, please contact our office at (407) 836-2000.

Tiffany M. Russell
Clerk of the Circuit

Deputy Clerk

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**IN THE CIRCUIT COURT
OF THE NINTH JUDICIAL CIRCUIT,
IN AND FOR ORANGE COUNTY, FLORIDA**

IN RE: ESTATE OF

DECEASED

PROBATE NO. 48-20 -CP-00_____ -O

**VERIFIED STATEMENT FOR DISPOSITION OF PERSONAL
PROPERTY WITHOUT ADMINISTRATION**

1. The petitioner, _____, alleges:
_____, whose last
known address was

And whose social security number is _____,
Died on _____.

2. The decedent left no Will.
 Decedent's Will was deposited with the Clerk
On the _____ day of _____.

3. The estate consists only of personal property exempt under Section 732.402 of the Florida Statutes, personal property exempt from the claims of creditors under the constitution of the State of Florida and preferred funeral expenses as described below:

<u>Description of Asset(s)</u>	<u>Address</u>	<u>Value</u>
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_____	_____	_____
_____	_____	_____
_____	_____	_____

4. Funeral and/or burial expense (statement or receipt attached):

<u>Services by</u>	<u>Address</u>	<u>Amount</u>	<u>Paid or Due</u>
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_____	_____	_____	_____
_____	_____	_____	_____

5. Payment or distribution is to be made to:

Name Address Property/Asset Amount

6. Petitioner knows of no other assets of the decedent except for:

Under penalties of perjury, I declare that I have read the foregoing and the facts alleged are true, to the best of my knowledge and belief.

Petitioner Signature

Address

Telephone No.

Relationship to Decedent

Date: _____

Statement obtained by:

Deputy Clerk/Notary Public

STATE OF _____
COUNTY OF _____

Sworn to (or affirmed) and subscribed before me this _____ day of _____, 20____, by _____.

(seal)

Notary Public

My commission expires: _____

Personally Known

Or Produced Identification

Type of Identification Produced _____.