

Name of Person Filing Document: \_\_\_\_\_  
Your Address: \_\_\_\_\_  
Your City, State, Zip Code: \_\_\_\_\_  
Your Telephone Number: \_\_\_\_\_  
Attorney Bar Number (if applicable): \_\_\_\_\_

**SUPERIOR COURT OF ARIZONA  
PINAL COUNTY**

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

**PB 2** \_\_\_\_\_

**AFFIDAVIT OF PUBLICATION**

an Adult or  a Minor, deceased

1. Attached to this page is the original Affidavit of Publication from the newspaper.

\_\_\_\_\_  
Dated

\_\_\_\_\_  
Signature of Person Filing Document