				-	Print Name	
					Print Address	
					Date	, 20
Name	of Newspap	er				
Addres	SS					
RE:	Estate of		Print Name		_, Deceased	
			1300PB		_	
To W	hom It Ma	ay Cond	cern:			
accor		h A.R.S	urt file-stamped co S. §14-3801, pleas			above matter. In per once a week for three
	Also encleation as i			order in the amou	unt of \$	for the cost of the
(of pul)			me when the first	publication will occ	ing area code) cur. When all three weeks copy of an Affidavit of
	Thank for	your h	elp in this matter.			
				Yours truly,		
				(Sign your name)	
Enclo			f Notice to Creditor or Money Order (ca		of time to find out what	the charge is)