State	of				

## **AFFIDAVIT OF DEATH**

I,, being duly sv	vorn, hereby affirm under penalty of perjury, on this day of,
20, that I am the: (Check	one)
<ul><li>☐ Executor</li><li>☐ Administrator</li><li>☐ Heir</li><li>☐ Survivor</li></ul>	
of the Estate of	(the "Decedent"). The purpose of this affidavit is to secure the transfer or
delivery of Decedent's: (Che	ck one)
☐ securities at the ti	e time of their death. me their death. your financial institution.
	, 20 At the time of death, the Decedent's legal residence was County of Decedent lived at
	years prior to death and was not a resident of any other State within the
United States of America at t	hat time. Decedent's social security number is
expenses, have been paid of described above and in the a state's laws. As exhibits to th	estate is subject to probate. All debts of the decedent, including funeral reprovided for. Accordingly, I am requesting the transfer or delivery of the items accompanying exhibits. I have served notice on all other successors as per my is affidavit please find a list of the (Check one) □real property □ securities the decedent, as well as a Certificate of Death.
Affiant	



## **NOTARY ACKNOWLEDGMENT**

State of	) ) <b>(Seal)</b>	
County of	)	
	vledged before me this day of , who is personally known to me or satisfactori cribed to the within instrument.	
Signature		
 Notary Public		
My Commission Expires:		

