

State of \_\_\_\_\_

County of \_\_\_\_\_

(Name): \_\_\_\_\_, being duly sworn, deposes and says that he/she/they reside(s) at

(address) \_\_\_\_\_, State of \_\_\_\_\_ and is: (Please check and fill in one)

Executor/rix of the Estate of \_\_\_\_\_

Administrator/rix of the Estate of \_\_\_\_\_

Survivor of the Joint Tenancy with \_\_\_\_\_

Beneficiary of the account of \_\_\_\_\_,

deceased who died at (location) \_\_\_\_\_ on (date) \_\_\_\_/\_\_\_\_/20\_\_\_\_; at the time of his/her

death the domicile (legal residence) of said decedent was at  Same Address as above or \_\_\_\_\_

County: \_\_\_\_\_ State: \_\_\_\_\_; that decedent resided at such address for \_\_\_\_\_ years; that decedent's

principal place of business at the time of his/her death was at  Retired or (business address) \_\_\_\_\_

County: \_\_\_\_\_ State: \_\_\_\_\_; that decedent's most recent Federal income tax return showed his/her legal

residence as  Same Address as above or \_\_\_\_\_ County: \_\_\_\_\_

State: \_\_\_\_\_; that within three years prior to death decedant was not a resident of another State. (If decedent resided in another State within

three years prior to death, set forth the name of the State and facts as to change of residence and establishment of final domicile):

that any and all debts, taxes, legacies and claims against the estate have been paid or provided for; that this affidavit is made for purpose of securing the

transfer or delivery of property owned by the decedent at the time of his/her death to a purchaser or the person or persons legally entitled thereto under the

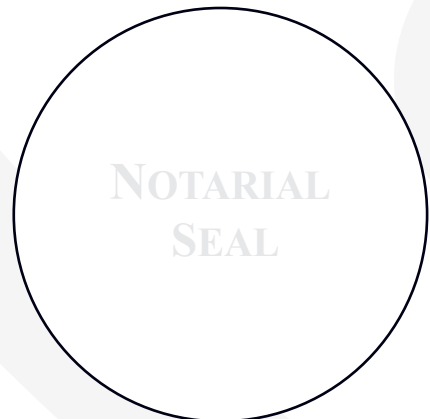
laws of decedent's domicile, and that any apparent inequality in distribution has been satisfied or provided for out of other assets in the estate.

Sworn to (or affirmed) before me on

Date: \_\_\_\_/\_\_\_\_/20\_\_\_\_

\_\_\_\_\_  
Give official capacity of official administering oath

My Commission expires: \_\_\_\_/\_\_\_\_/20\_\_\_\_



Executor/rix or Administrator/rix or Survivor or Beneficiary Signature

Signature X	Date
-------------	------