Small Estate Affidavit for Estates Not More Than 25,000

	nty of	_	
I, that:		_ (Name of Affiant), upon being duly	y sworn, on reachth
1.	My post office addre	ess is:	where mail
2.	My residence addre	ess is:et al. ss, ch	, code).
3. Dec	I am a legal succes edent), who resided		(Name of
	[] Surviving	ss, city,	state, zip code) , as:
	1		
	[yrar		
] rother or sis	ster,	
	niece or nep	hew,	
	[] aunt or uncle) .	
4.	I am of full age and	legal capacity as an inhabitant of the	e commonwealth.
5.	The decedent pass	ed from this life on	(date).
	ch, including any motor	ate consists entirely of personal prop r vehicle of which the decedent was t ot exceed twenty-five thousand dollar	the owner, and other
7.	At least thirty (30) d	lays have elapsed since the death of	the decedent.

the probate court of the county in which the decedent resided.

8.

No petition for letters testamentary or letters of administration has been filed with

9.	I am entitled to payment or delivery of the property hereby claimed.
10.	A schedule of every asset of the estate known to me is attached as Schedule A .
11. dece	The names and addresses of surviving joint owners of property with assed, know to me, if any, are as follows: (List, if any, or state not
12. to pro	The names and addresses known to me of any induction of the estate as a result of intestal and follows. List, if april on the estate as a result of intestal and follows.
13. to pro	The names are sees of mean y individual who might be entitled occeeds of the est. If the eccentrist we are as follows: (List, if any, or state est.)
.4.	I ha act as voluntary personal representative of the estate of the sed will administer the same according to law, and apply the proceeds mity with Section 3-1201 of the Massachusetts Uniform Probate Code.
15.	opies of this statement and death certificate have been sent to the division of all assistance by certified mail.
16.	A copy of the death certificate of the deceased is attached hereto.
THE	FOREGOING STATEMENT IS MADE UNDER THE PENALTIES OF PERJURY.
	(Printed Name of Affiant)
	(Signature of Affiant)
20	SWORN to and subscribed before me, this the day of,,

	(Printed Name of Notary Public)
	(Signature of Notary Public)
My Commission Expires:	
Residing at:	

Schedule A All Known Assets of the Estate

Description of Asset		Estimat
	Total	