

## **AFFIDAVIT OF SURVIVORSHIP**

The undersigned being first duly sworn upon oath hereby states under the penalties for perjury that the following representations are true and correct:

1	died on	
. At the time of death, the only surviving legal heir's of		were:
<u>Name</u>	<u>Address</u>	
3. At the time of death,	did not have a will	I.
4. No estate has been opened or administere	ed for	
further the undersigned sayeth not.		
Date:	Signature	
	Printed Name	
	Street Address	
	City, State, Zip Code	
Subscribed and sworn to before me, a notary public, on		, 20
, Notary Public resident of		County
Au Commission Euripes		