

AFFIDAVIT OF ADMINISTRATOR

STATE OF NEW YORK)
) SS:
COUNTY OF)

BEING DULY SWORN, DEPOSES AND SAYS:

That he resides at _____

That he is the Principal and the duly appointed Administrator of the Estate of _____

Deceased, who died at _____

And that there are no other heirs at law or next of kin other than those above named; That deponent was familiar with affairs of deceased and knows that deceased was not engaged in business at the time of death and that the entire personal estate of which the deceased died possessed, was as follows:

(List assets or attach a list of assets)

That the following described funeral and administration expenses and debts of the deceased have been paid in full.

Name of Creditor	Amount	Nature of Claim
		Funeral Expenses
		Attorney's Fees

Leaving a balance for distribution to those persons legally entitled thereto of \$ **(Amount to be distributed)**

Which balance has been distributed as follows:

Name	Amount	Name	Amount

Whose general releases are attached hereto; That there are no debts or claims of any description remaining unpaid or for which the estate of the decedent is liable; That deponent has advertised for claims and that no claims have been represented other than above set forth; that estate is not liable for any unpaid transfer taxes; that deponent makes this affidavit to induce _____, as surety to act upon it and more particularly to terminate its bond on behalf of deponent as such Administrator on its records without the formality of judicial account, knowing the said _____, as surety, relies on the truthfulness of this affidavit for its protection.

Sworn to before me this

day of

By: _____ (L.S.)

(Signature of Administrator)

By: _____
Notary Public