

Affidavit of Domicile

State of _____

County of _____

I, _____, being duly sworn, depose and say:

1. That I am the _____ of _____, deceased, who died on the _____ day of _____, _____.

2. That at the time of death, the domicile (legal residence) of said decedent was: _____

3. That the decedent had resided at the above address for _____ years immediately prior to death.

4. That this affidavit is made for the purpose of securing the transfer or delivery of property owned by the decedent at the time of death.

Signature

Name

Date

Subscribed and sworn to before me this _____ day of _____, _____.

Notary Public