

DEATH AFFIDAVIT

STATE OF [STATE])) ss. COUNTY OF [COUNTY WHERE THE AFFIDAVIT IS SIGNED])

1. Affiant

I, [AFFIANT NAME], residing at [AFFIANT ADDRESS], being first duly sworn, depose and state:

1. I am over eighteen (18) years of age, of sound mind, and competent to make this Death Affidavit.
2. I am the Decedent's [AFFIANT S RELATIONSHIP TO DECEDENT] and have personal knowledge of the Decedent's death and the circumstances set forth herein.

2. Purpose

This Affidavit is made as sworn supplemental evidence of the death of the Decedent identified below, for the following purpose: [PURPOSE OF THIS AFFIDAVIT]

3. Statement of Death

1. **Decedent.** [DECEDENT S FULL LEGAL NAME] (the "Decedent"), born , died on at [PLACE OF DEATH CITY STATE].
2. **Social Security Number.** The Decedent's Social Security Number is intentionally omitted from this Affidavit for privacy reasons and is available under separate cover upon lawful request.
3. **Relationship.** I am the Decedent's [AFFIANT S RELATIONSHIP TO DECEDENT].
4. **Certified death certificate.** An official certified death certificate has been issued (or will be issued) by the applicable state vital records authority and, where required by the requesting party, is attached to this Affidavit as an exhibit. This Affidavit is provided as supplemental sworn evidence of death and is not intended to substitute for a certified death certificate where one is lawfully required.
5. **Asset / account.** This Affidavit is provided for general proof of death for the purpose stated above.
6. **No adverse proceeding.** To the best of my knowledge, the Decedent is not the subject of any pending criminal, civil, or probate proceeding that would affect the facts stated herein.

Note — certified death certificate. A certified death certificate issued by the appropriate state or foreign vital records authority is the preferred and often legally required proof of death. This Affidavit is supplemental and does not substitute for a certified death certificate where one is lawfully required.

4. Indemnification

I agree to indemnify and hold harmless any person or institution that transfers property, releases funds, pays insurance proceeds, or otherwise acts in reliance upon this Affidavit from and against any claims, losses, and expenses (including reasonable attorneys' fees) arising out of such reliance.

5. Additional Facts

[NUMBERED FACTS ONE FACT PER PARAGRAPH]

Oath and Penalty of Perjury

I certify under penalty of perjury under the laws of the State of [STATE] that I know the contents of this Affidavit signed by me and that the statements set forth above are true and correct to the best of my knowledge.

Signature of Affiant

Affiant

_____ PRINTED NAME

_____ SIGNATURE

_____ DATE

Notary Jurat

State of [STATE] County of [COUNTY WHERE THE AFFIDAVIT IS SIGNED]

Subscribed and sworn to before me this _____ day of _____, 20, by [AFFIANT NAME], who is personally known to me or who produced _____ as identification.

Notary Public: _____ My commission expires: _____

[NOTARY SEAL]

***Jurat vs. acknowledgment.** This certificate is a **jurat** — the correct notarial certificate for an affidavit. A jurat (i) requires the affiant to appear before the notary, (ii) requires the affiant to sign in the notary's presence (no pre-signing), and (iii) includes administration of an oath or affirmation. An **acknowledgment** (used for deeds, powers of attorney, and contracts) does NOT include an oath and is the wrong certificate for an affidavit. Using an acknowledgment in place of a jurat may cause a court to reject the affidavit as defective.*