

Affidavit of Small Estate - Owner

STATE OF _____

} ss:

COUNTY OF _____

}

I, _____, of _____

(NAME)

(ADDRESS)

_____, _____, _____, being duly sworn,

(CITY)

(STATE)

(ZIP CODE)

depose and say:

I am the _____ of _____

(RELATIONSHIP)

(NAME OF DECEDENT)

who died on the _____ day of _____, 20 _____: that said, the

(DATE)

(MONTH)

(YEAR)

decedent left no estate that requires probates or administration: that I am the _____

(RELATIONSHIP)

to the insured under insurance policy number _____ with National Benefit Life

Insurance Company. Whereas it is my expressed desire to be named owner of the policy

with all rights under this policy, I hereby expressly agree to indemnify National Benefit

Life Insurance Company against any future claim that may be made by any other party.

(SIGNATURE)

Sworn to before me this

_____ day of _____, 20 _____

(NOTARY PUBLIC)