

## Affidavit of Small Estate - Owner

STATE OF \_\_\_\_\_

} ss:

COUNTY OF \_\_\_\_\_

}

I, \_\_\_\_\_, of \_\_\_\_\_  
(NAME) (ADDRESS)

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, being duly sworn,  
(CITY) (STATE) (ZIP)

depose and say:

I am the \_\_\_\_\_ of \_\_\_\_\_  
(RELATIONSHIP) (NAME OF DECEDENT)

who died on the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_: that said  
(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)