

Affidavit of Small Estate - Owner

STATE OF _____

COUNTY OF _____ } ss:

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

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)