

AFFIDAVIT OF SUCCESSOR IN INTEREST

being of	Before me, the undersigned authority, personally appeared		(your name here)
1.	That I am	(your name here);	
2. birth is	That I am acting on behalf of the successor(s) of the estate of, and my social security number		<i>(name of deceased).</i> My date of;
	That I reside at		(street address,

4. That the following individual(s) constitute the entirety of the surviving successors in interest to the estate of the deceased and is (are) entitled to payment in the following respective proportions:

*Provide names of successors in interest, their relationships to deceased, ages, addresses and telephone numbers, and respective proportions--attach additional pages if needed;

5. That no application or petition for the appointment of a personal representative is pending or has been granted in any jurisdiction regarding the estate of the deceased;

6. That all taxes and debts of the estate have been paid or otherwise provided for or are barred by limitations;

7. That the fair market value of property located in this state owned by the decedent and subject to disposition by will or intestate succession at the time of the decedent's death less liens and encumbrances, **does not exceed Fifty Thousand Dollars (\$50,000.00**);

8. That each claiming successor is entitled to payment in the respective proportions as set forth in this affidavit;

9. That each successor in interest is to claim the share owing to the estate of ______ (name of deceased) from the Oklahoma Police Pension and Retirement System on Form 113; and

10. That I agree to indemnify and hold harmless the Oklahoma Police Pension and Retirement System, its agents, employees, officers and trustees from any and all claims of any nature whatsoever known or unknown in relation to the payment of any monies due and owing the estate of _______ (*name of deceased*) pursuant to this affidavit of successor in interest.

FURTHER AFFIANT SAYETH NOT.

Affiant Signature (Witnessed by Notary)

Date

NOTARY'S SIGNATURE:

STATE OF) ss. COUNTY OF)

Subscribed and sworn to before me, the undersigned notary, on this the _____ day of _____, 20____, 20___, 20____, 20____, 20____, 20____, 20____, 20____, 20____, 20___, 20____, 20____, 20____, 20____, 20____, 20____, 20___, 20___, 20____, 20____, 20____, 20____, 20

Notary Signature

My commission number

[SEAL]

My commission expires