

ESTATE OF _____

DECEASED _____

: IN THE COURT OF COMMON PLEAS OF
: CUMBERLAND COUNTY, PENNSYLVANIA
: REGISTER OF WILLS
:
: DOCKET NO. _____
:
: SOCIAL SECURITY NO. _____
:

SMALL ESTATE AFFIDAVIT

For Insurance Proceeds

NOT to be used for Settlement of Small Estates under 20 Pa.C.S.A. §3102

(Original Death Certificate Must Accompany this Form)

Before the Register of Wills of Cumberland County personally appeared _____,
being duly sworn, deposes and says that _____,
age _____, a resident of said County, departed this life, on _____, possessed of personal
property estimated to be of the value of \$ _____, and possessed of real estate, the est. value _____
and the location of which is _____

Except as follows, Decedent did not marry, was not divorced, and did not have a child born or adopted after
execution of any testamentary writings whether or not offered for probate; was not the victim of a killing, was
never adjudicated an incapacitated person, and was not a party to a pending divorce proceeding at the time of
death wherein grounds for divorce had been established as defined in 23 PA C.S. section
3323(g): _____

The total amount of insurance proceeds payable by _____ is
\$ _____ which does not exceed \$11,000 and 60 days have elapsed since the
death of the insured. The undersigned agrees payment cannot be made under this Affidavit if a written claim for
same has been made by a Personal Representative of the estate and no other heir(s) having preference exist or have
released their benefits to the undersigned.

That said decedent left a spouse – whose name and residence is _____

and the following as next of kin:

(use additional sheet if required)

NAMES	RELATIONSHIP	RESIDENCE

That the above named are the spouse & and all the known next of kin of said decedent, to the best of my knowledge and
belief.

Your Petitioner avers there are NO KNOWN PROBATABLE ASSETS that would require an estate proceeding. Therefore, NO
ESTATE WILL BE RAISED, AND LETTERS ARE NOT NECESSARY.

Signed

By: _____

(Signature)

Sworn and subscribed to before me this

____ day of _____, 20 ____

Register of Wills/Notary Public

My Commission

Expires _____

(Printed Name & Address)