

AFFIDAVIT OF HEIRSHIP

The State Of _____

County of _____

BEFORE ME, the undersigned authority, on this day personally appeared all the undersigned affiants who, after having been by me duly sworn, on oath, each for himself and herself, deposes and says that on the ____ day of _____, _____, at _____, in the county of _____, state of _____, (Name) _____ died; that the deceased left a will; that no application for administration has been filed; that there is no necessity for an administration upon the estate; that the affiants' entitlement is based upon affiant's status as the sole beneficiary shown under the last Will & Testament of _____, the deceased, which is not being offered for administration or probate. Affiants agree by signing below that, in all documents and matters, APHA shall recognize the signature of _____ as the authorized agent and as attorney-in-fact to execute any and all items required by the American Paint Horse Association in connection with the registered horses owned by the decedent and/or documents necessary for registration of horses with the American Paint Horse Association.

(Affiants)

(Affiants)

SUBSCRIBED AND SWORN TO BEFORE ME THIS THE _____ day of _____, _____.

Notary Public in and for _____ (State)

Seal

County of _____

(Signature of Notary) _____

ITEMS TO ATTACH:

- **Copy of the death certificate.**