SURROGATE’S COURT OF THE STATE OF NEW YORK COUNTY OF

X

VOLUNTARY ADMINISTRATION, Estate of

 ,

Deceased.

X

STATE OF )

) ss.: COUNTY OF )

**AMENDED AFFIDAVIT**

**IN RELATION TO SETTLEMENT OF ESTATE**

**UNDER ARTICLE 13, SCPA**

(as of 11/2019)

File No.

I, , being duly sworn, depose and say: (Name)

1. I am the voluntary administrator of the above-named decedent and make this affidavit pursuant to Article 13 of the Surrogate’s Court Procedure Act. The original and any amended affidavits were filed on the following dates: [list dates]
2. I was found qualified to act as the voluntary administrator of the above captioned estate by the

 County Surrogate’s Court on the day of , 20 .

1. The following items of personal property, owned by the above-named decedent, were not listed in paragraph 9 of the Affidavit of Voluntary Administration originally filed nor in any amended affidavits filed with the court.

**Items of Personal Property**

**Separately Listed Value of Each Item**

Total $

1. For the item of personal property listed in paragraph 3, I require additional certificates of voluntary administration.

The value of all of the decedent’s non-exempt assets still does not exceed **$50,000.00.**

Sworn to before me on (Affiant)

 , 20

(Print Name)

Notary Public

My Commission Expires:

(Affix Notary Stamp or Seal)

Signature of Attorney:

Print Name:

Firm Name: Tel No. :

Address of Attorney:

**SE-3B (11/2019)**