REGISTER OF WILLS DAUPHIN COUNTY, PENNSYLVANIA

File No: \_\_\_\_\_

## AFFIDAVIT AND RELEASE OF BENEFICIARY

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The undersigned swears and affirms as follows:

- 1. I am a beneficiary of the above referenced estate.
- 2. I am of legal age and of full legal capacity.
- 3. I am familiar with the contents of the petition for letters filed in this case and with the petitioners seeking letters testamentary or letters of administration in the above estate.
- 4. I agree that the petitioner(s) may be appointed to serve as a personal representative(s) of the estate without the requirement of posting bond to protect my interests as a beneficiary of the estate, which would otherwise be required.
- 5. I hereby release the Register of Wills and her deputies and agents from any claim arising from the Register issuing letters to the petitioner(s) without requiring bond, under 20 PA. C. S. Section 3172 or other applicable law.

(Date)	(Signature)	
	(Printed Name)	
	(Street Address)	
	(City, State and Zip)	

Note: This form is only effective if all beneficiaries of the estate are of full legal age and full legal capacity, and all such beneficiaries execute this affidavit.

## Executed in Register's Office

Sworn to or affirmed and subscribed before me this \_\_\_\_\_ day of

Deputy for Register of Wills

## Executed out of Register's Office

Before the undersigned personally appeared the party executing this affidavit/release and certified that he or she executed the affidavit/release for the purposes stated within on this \_\_\_\_\_ day of

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Notary Public My Commission Expires: