

Register of Wills of Lackawanna County, Pennsylvania
AFFIDAVIT OF DEATH
UNDER 20 PA.C.S.A.925

Decedent _____ File No. 35-202__-_____

A/K/A _____ Social Security No. ____-____-_____

I, _____, an interested Party, being duly sworn according to law, deposes and says:

1. I am an interested party in the estate of _____
(Name of Deceased)

My interest is _____

2. I have reviewed the public record, loan documents, and other available information and determined that _____, died on _____
(Name of Deceased) (Date of Death)

3. Deceased resided at _____ prior to death
(Deceased Residence)

4. Based upon information and belief, Deceased was _____ years old at the time of death.

5. The instant Certificate is filed pursuant to PA C.S.A> 925, which permits the filing of a Certificate where an original death certificate cannot be obtained, and it is not necessary to administer an estate, but a public record of death is necessary.

(Signature of Affiant)

I hereby swear or affirm that the statements contained in this affidavit are true and correct to the best of my information, knowledge and belief, and this statement is being made pursuant to the penalties of 10 PA C.S.A. 4903 regarding false swearing to authorities.

Signed and sworn (or affirmed to before me on this

_____ day of _____, 202__

Notary Public

My commission expires: