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.