

SURROGATE'S COURT OF THE STATE OF NEW YORK  
COUNTY OF \_\_\_\_\_X

VOLUNTARY ADMINISTRATION, Estate of

**AMENDED AFFIDAVIT  
IN RELATION TO SETTLEMENT  
OF ESTATE  
UNDER ARTICLE 13, SCPA  
(as of 9/96)**

\_\_\_\_\_,  
Deceased.

File No. \_\_\_\_\_

STATE OF NEW YORK            )  
  ) ss.:  
COUNTY OF                    )

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

1. I am the voluntary administrator/trix 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/trix of the above captioned estate by the \_\_\_\_\_ County Surrogate's Court on the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

3. 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 \$ \_\_\_\_\_

4. 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 **\$20,000.00**.

Sworn to be fore me on \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
(Affiant)

\_\_\_\_\_  
(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-2B \*For use only where decedent died on or after August 29, 1996.**

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