

SURROGATE'S COURT OF THE STATE OF NEW YORK _____ **COUNTY**

In The Matter of the Estate of

FIREARMS INVENTORY

(SCPA §2509)

Deceased.

FILE NUMBER _____

The undersigned, [] a fiduciary, or [] an attorney of record certifies that the following firearms, as defined by Section 265.00 of the Penal Law, make up part of the decedent's estate.

Name of Fiduciary or Attorney: _____
(Address, if changed): _____

	Make:	Model:	Caliber or Gauge:	Serial #:	Valuation:
1					\$
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
			TOTAL: (as indicated in section F2 of Inventory of Assets)		

(mark box if more entries are necessary - and attach extra pages)

ATTORNEY

Certified to be true on _____, 20____

Name: _____

Address: _____

Telephone: _____

Signature

Print Name

A copy of this Inventory must also be filed with DCJS at:

*Division of Criminal Justice Services
Alfred E. Smith Building
80 South Swan Street
Albany, NY 12210*

Firearms Inventories filed with the Surrogate's Court will be kept in a secure location separate from the estate file and will be made available for inspection only to persons interested in the proceeding and their counsel, unless otherwise ordered by the Court.