SUPREME COURT OF THE STATE OF NEW YORK

COUNTY OF WESTCHESTER

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In the Matter of the Guardianship of **STATEMENT OF DEATH**

 **Index No.**

an Incapacitated Person (Deceased).

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STATE OF NEW YORK )

COUNTY OF WESTCHESTER ) ss.:

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, being duly sworn, deposes and says:

 I am the Guardian of the Person and Property of \_\_\_\_\_\_\_\_\_\_\_\_\_\_, an Incapacitated Person pursuant to the Order of the Honorable \_\_\_\_\_\_\_\_\_\_\_\_dated\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. The Incapacitated Person died on **\_\_\_\_\_\_\_\_\_\_\_, 2016** in City/Town/Village\_\_\_\_\_\_\_\_\_\_\_\_\_. (Please attach Death Certificate.)

There is approximately \_\_\_\_\_\_\_\_\_\_\_ in guardianship assets. **This amount is subject to outstanding legal fees and Medicaid claim.**

**□** The **Guardianship** is in possession of a Last Will and Testament. The nominated executor, administrator or trustee of **the estate is \_\_\_\_\_\_\_\_\_\_\_\_**.

**□** The **Guardianship** is not in possession of a Last Will and Testament, has never been provided or served with a copy of a Last Will and Testament and has no independent or other knowledge that **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** has executed a Last Will and Testament. The **Guardianship** has no independent or other knowledge with respect to whether there is a nominated/appointed executor, administrator or trustee of **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** estate.

The names and addresses of the persons entitled to notice of proceeding pursuant to the Order appointing the Guardian are as follows:

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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STATE OF NEW YORK

COUNTY OF WESTCHESTER ss.:

On the \_\_\_\_\_\_ day of  before me personally came \_\_\_\_\_\_\_\_\_\_\_\_\_, to me known who, being by me duly sworn, did depose and say that he/she is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, the corporation described in the foregoing instrument; and that he/she signed his/her name thereto in her capacity as \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ of \_\_\_\_\_\_\_\_\_\_\_\_\_\_ as Guardian of **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Notary Public