## AFFIDAVIT FOR COLLECTION OF PERSONAL PROPERTY Minnesota Statutes § 524.3-1201

Estate of:	
	, Decedent.
I, state that:	
1. My name is:	·
2. My address is:	
3. Decedent died on	A certified copy of Decedent's death
certificate is attached to this Affidavit.	
4. I am the successor of the Deceden	nt and I have legal standing to complete this form
because:	
involving any contents of a safe deposit b \$50,000.  6. Thirty days have elapsed since the be delivered is the contents of a safe depositive to the contents of a safe depositive to the contents of said box.  7. No application or petition for the shas been granted in any jurisdiction.	etermined as of the date of death, wherever located, box, less liens and encumbrances, does not exceed to death of the Decedent, or in the event the property to desit box, 30 days have elapsed since the filing of an appointment of a personal representative is pending or ded to payment or delivery of the following described.
Dated:	(Cianatura of career who filled out this form)
	(Signature of person who filled out this form)
Notarial stamp or seal (or other title rank)	Signed and sworn to (or affirmed) before me on (date)
	by: (Print name of the person that signed this form)
	SIGNATURE OF NOTARY PUBLIC OR OTHER OFFICIAL

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