# Affidavit of Foreign Personal Representative Checklist



# Please use this form ONLY if

- 1. The DCU Member is deceased and did NOT live in Massachusetts or New Hampshire at the time of their death; **AND**
- 2. You are relying on probate documents from a jurisdiction other than Massachusetts or New Hampshire.

## To complete this process, please follow these steps:

- 1. Complete the Affidavit of Foreign Personal Representative form in its entirety. Incomplete or unnotarized forms will delay processing of your request.
- 2. Return this completed and notarized form by **one** of the following ways:
  - a. Fax to 833.670.2311
  - b. Email the form to dne@dcu.org
  - c. Mail your completed form to:

## **Digital Federal Credit Union**

Membership Maintenance 220 Donald Lynch Boulevard PO Box 9130 Marlborough, MA 01752-9130

# What you can expect

- If received by mail: Allow 2 weeks for your request to be processed
- If received by email or fax: Once your request is received it will be processed within 48 business hours

# Affidavit of Foreign Personal Representative



Relationship

Estate of	(the "Decedent")
	(the Beeccaline)

Decedent's DCU Member Number: \_\_\_\_\_

\_\_\_\_\_, am over the age of 18 and the \_\_\_\_

of the Decedent, and I do hereby state from my personal knowledge that:

- The decedent was **NOT** a resident of Massachusetts at the time of their death;
- The date of the death of the decedent is \_
- There is no formal or informal testate or intestate proceedings, such as probate proceedings, pending in Massachusetts pertaining to the decedent, and there is also no application or petition for such proceedings pending in Massachusetts, **and**

Check as applicable:

I am the surviving personal representative appointed for the Decedent in the jurisdiction where the Decedent resided and domiciled at the time of their death, and as such am entitled to payment or delivery of the Decedent's personal property.

#### OR

I. \_

There is no personal representative appointed for the Decedent in the jurisdiction where the Decedent resided and was domiciled at the time of their death, **and** 

I am the personal representative appointed for the Decedent in a jurisdiction other than Massachusetts or the jurisdiction where the Decedent resided and was domiciled at the time of their death, and that appointment proceeding was the first commenced, **and** 

No proceedings are pending for appointment of a personal representative in any court in the jurisdiction where Decedent resided or was domiciled, and as such I am entitled to payment or delivery of the Decedent's personal property.

## SIGNED UNDER THE PENALTY OF PERJURY

I certify under the penalties of perjury that the foregoing statements are true and correct to the best of my knowledge.

Date	Signature of Person Com	npleting Affidavit	
	Printed Name of Person	Completing Affidavi	t
State (Commonwealth) of		, county of	f
This instrument was acknowledged before me c	Date	by	Person Signing Above
My Commission Expires Affix Seal, if any		ture of Notarial Offic	er / Title