



# STATE OF ISRAEL SMALL ESTATE AFFIDAVIT AND INDEMNITY FORM

## THIS FORM MAY ONLY BE USED IF:

**1. The face amount of the decedent's bond does not exceed \$6,000. 2. There has been no administration of the estate.**

We, the undersigned, being severally duly sworn, depose and say that **A)** None of the foregoing persons has been declared legally incompetent by any court, or has had a representative, committee, or guardian appointed to represent his or her affairs. **B)** The funeral expenses and all debts due and owing by the decedent at the time of death have been paid by the undersigned. **C)** No letters of Administration or Letters Testamentary have been issued by a court and no petition for the appointment of any personal representative of the issuance of any letters is pending in any court; nor do any of the undersigned intend to file such petition or know of any intention on the part of anyone else to file such petition.

- D) We are fully familiar with the facts relating to the estate of \_\_\_\_\_ who died interstate or leaving a Will (attach a certified copy). We will attach certified copy of the death certificate showing that death occurred on or about \_\_\_\_\_.
- E) At the time of death, the decedent was a resident of the State of \_\_\_\_\_ residing at \_\_\_\_\_.
- F) The assets of the estate of the decedent do not exceed \$\_\_\_\_\_.
- G) We are the only surviving heirs in law and next of kin and beneficiaries under the will of the decedent. Who are entitled to share in the estate and our respective relationships to the decedent and our addresses are as follows. All heirs at law and next of kin must be listed. None may be omitted:

NAME	RELATIONSHIP TO DECEDENT	RESIDENCE
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

H) The undersigned make this affidavit for the purpose of inducing the State of Israel, through Computershare Trust Company, N.A., fiscal agent to:

(Check one box as applicable)  <input type="checkbox"/> Transfer and Re-Register in the name of <b>OR</b> <input type="checkbox"/> Pay the maturity value to	Name: _____ Address: _____ Social Security Number: _____
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TYPE OF BOND (Savings, Coupon, Current Income)	ISSUE/PRINCIPAL AMOUNT	BOND# (Bond Certificate) OR ACCOUNT # (Book Entry)	NAME OF ISSUE: (i.e., 6 <sup>th</sup> IVRI, Jubilee 3 <sup>rd</sup> Series)

I) The undersigned jointly and severally agree to indemnify and hold harmless Computershare Trust Company, N.A. as Fiscal Agent and Development Corporation of Israel, their successors and assigns from and against any and all liability, loss, and damage or expense in connection with or arising out of this transfer, purchase, or redemption. All heirs and next of kin must sign here. If any one of them is a minor, the parent may sign on behalf of the minor. Each and every signature in the following section must be **Medallion Guaranteed**.

_____ L.S.	_____ L.S.
_____ L.S.	_____ L.S.
_____ L.S.	_____ L.S.

**INSTRUCTION FOR GURANTEE**

The signature(s) must be guaranteed by an eligible guarantor institution Which is a member or participant of one of the following signature Programs:

- Securities Transfer Agents Medallion Program (STAMP)
- New York Stock Exchange Medallion Program (MSP)
- Stock Exchange Medallion Program (SEMP)