

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

PROBATE PROCEEDING,
WILL OF _____

a/k/a _____

Deceased.
_____ X

(Note: Attach a copy of the Will/Codicil to this Affidavit of Comparison executed by any two persons; if a photocopy of the Will is used, only one person need make the affidavit.)

AFFIDAVIT OF COMPARISON

File No. _____

STATE OF NEW YORK)
) ss.:
COUNTY OF _____)

I/We _____ (and) _____ being duly sworn, say(s), that (he/she has) (we have) carefully compared the copy of decedent's Will/Codicil propounded herein to which this affidavit is annexed with the original Will dated the _____ day of _____, (and the original Codicil dated the _____ day of _____, _____), about to be filed for probate, and that the same is in all respects a true and correct copy of said original Will/Codicil and of the whole thereof.

Sworn to be fore me this _____
day of _____, 20____

Notary Public
Commission Expires:
(Affix Notary Stamp or Seal)

Signature

Print Name

Signature

Print Name

Name of Attorney _____ Tel. No.: _____

Address of Attorney _____