

Part D

1. If none of the above survives and an executor or administrator has been appointed, the following statement should be completed:

I/we have been duly appointed N/A of the estate of the deceased, as evidenced by
(Executor or administrator)

certificate of appointment herewith, administration having been taken out in the interest of

N/A

(Name, address, and relationship of interested relative or creditor)

and such appointment is still in full force and effect.

NOTE. -- If making claim as the executor or administrator of the estate of the deceased, no witnesses are required, but a court certificate evidencing your appointment must be submitted.

2. If no administrator or executor has been appointed, will one be appointed? N/A
(Yes or No)

**DESIGNATED BENEFICIARY, SURVIVING SPOUSE, CHILDREN, PARENTS, OR LEGAL REPRESENTATIVES DO NOT
FILL IN PART E. ALL OTHER MUST.**

Part E

Have the funeral expenses been paid? Yes (If paid, receipted bill of the undertaker must be attached hereto.)
(Yes or No)

Whose money was used to pay the funeral expenses? Robert Johnson

FINES, PENALTIES, and FORFEITURES are imposed by law for the making of false or fraudulent claims against the United States or the making of false statements in connection therewith.

[Signature] 6/30/10
(Signature of claimant) (Date)

(Signature of claimant) (Date)

123 Frankfurt Heim
(Street address)

(Street address)

Einander Germany 58585 5858 Phone (555) 555-5555
(City, State, and ZIP code)

(City, State, and ZIP code)

TWO WITNESSES ARE REQUIRED

We certify that we are well acquainted with the above Nancy Smith and that
(Name(s) of claimant(s))
the signature(s) of the claimant(s) was (were) affixed in our presence.

DAVID WATKINS
(Signature of witness)

[Signature]
(Signature of witness)

123 Main St Apt C
(Street address)

123 Main St Apt D
(Street address)

Capitol, FL 44444
(City, State, and ZIP code)

Capitol, FL 44444
(City, State, and ZIP code)

All Federal checks in possession of the claimant, drawn to the order of the decedent, in payment of pay and allowances should accompany this claim.

AFFIDAVIT REGARDING CITIZENSHIP STATUS

This is to certify I am a citizen of GERMANY and that for the United States
(COUNTRY)

federal income tax purposes, I am a resident of GERMANY
(COUNTRY)

NANCY SMITH
(Signature)

Subscribed and sworn to before me this 30TH day of JUNE 20 10.

NOTARY SIGNATURE
(Signature and title of Attesting Officer or Notary)

DFAS-CL 5840/26 (REV. 7.92)

