Telephone Number

Address

Relationship

*(mm-dd-yyyy)*

Date of Birth

Name

sisters, other:

Please insert the name of living relatives in the following order of relationship: surviving spouse, children, father and/or mother, brothers and/or

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NAME(S) OF SURVIVORS, IN ORDER OF KINSHIP

ss.

*(mm-dd-yyyy)*

and that on

Your Name

I, being duly sworn according to law, declare that I reside at

City

Date of Death

State

VENUE

*\*Provide information below to the extent that it is available.*

**AFFIDAVIT FOR THE SURVIVING SPOUSE OR NEXT OF KIN**

CONSULAR OFFICES OF THE UNITED STATES OF AMERICA

Specify: widow, widower, child, father,

Name of Deceased

did/did not have a will or trust specifying the disposition of his or her estate.

permanent legal residence

where the deceased last had a

United States or foreign country

Name of state/foreign state in the

. To the best of my knowledge,

and as such am entitled to receive the decedent's estate under the laws of

mother, sibling, other

U. S. Department of State

Complete Address of the Deceased

. I am the

Name of Deceased

had permanent legal residence at

Street Address

*(Including City, State/or Country)*

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Type Name of Notary Public

Signature of Notary Public

Address of Notary Public

Type Name of Affiant

Date

*(mm-dd-yyyy)*

Signature of Affiant

Subscribed and sworn to before me by

Relationship

Telephone Number

Address

Date of Birth

Name

**or the decedent is domiciled. Additionally, in exceptional circumstances, a U.S. Consular**

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**related issues.**

**including for the notification of kin or judicial matters involving contested estates and**

**state, local, or foreign government entities for administrative or law enforcement purpose,**

**ROUTINE USES: The information solicited on this form may be made available to federal,**

**documents.**

**such as certified copies of Letters Testamentary, Letters of Administration, or trust**

**require the person claiming to be next-of-kin to obtain and present alternative documents**

**Providing the information in the affidavit is voluntary, but, failure to complete this form will**

**care of the decedent's estate or, in appropriate circumstances, to the next of kin.**

**release the personal effects of the decedent to a person who has qualified legally to take**

**Officer may also serve as administrator of an estate. A U.S. Consular officer may only**

**are authorized by treaty by the authorities or usage of the country where the death occurs**

**take care of the decedent's estate and if the responsibilities of a "provisional conservator"**

**of their death if there is not a legal representative, partner in trade, or trustee appointed to**

**"provisional conservator" of the personal effects of U.S. citizens who die abroad at the time**

**dies abroad. A U.S. Consular Officer, or a U.S. diplomatic Officer is required to serve as**

**requirements of 22 U.S.C. 2715c and determine the next-of-kin of an American citizen who**

**The information on this form is requested to assist U.S. Consular Officers to fulfill the**

**PRIVACY ACT STATEMENT**