



AFFIDAVIT OF HEIRSHIP

THE STATE OF _____:

COUNTY OF _____:

Name of Record Owner: _____ AQHA ID # _____

BEFORE ME, the undersigned authority, on this day personally appeared all the undersigned affiants, who, after having been by me duly sworn, on oath, each for himself and herself, deposes and says that on the _____ day of _____, _____, at _____, in the county of _____ and State of _____, the person listed above died; that the deceased left no will; that no application for administration has been filed; that there is no necessity for an administration upon the estate; that affiants herein are the sole and only heirs at law of the deceased (heirs at law of the decedent may be surviving spouse, children, children of a deceased child, or parents if the previously specified persons do not exist); and that it is the desire of affiants that the American Quarter Horse Association transfer, register and in all matters recognize the signature of _____ whose address is _____, as the authorized agent and as attorney-in-fact to execute any and all items required by the Association in connection with the registered horses owned by decedent. We, the undersigned affiants, agree jointly and severally, to indemnify American Quarter Horse Association from any and all liability, whenever or however arising from such recognition, and if the Association is sued in a court of law, to defend it at the undersigned's expense, and if final, non-appealable judgment is taken against American Quarter Horse Association, to obtain written release thereof in form acceptable to American Quarter Horse Association.

AFFIANTS (signature)

AFFIANTS (signature)

SUBSCRIBED AND SWORN TO BEFORE ME, by the said _____

this _____ day of _____, _____, to certify which witness my hand and seal of office.

Notary Public in and for _____

My Commission Expires: _____