## **FORM -13**

## (See Rule15 of Government Savings Promotion Rules, 2018)

## Affidavit

To,							
The Postmaster/Manager							
-							

Sir,

1.	I/We					
						of
	late			decease	d deposit	tor)
	resident of			. do her	eby declare a	and
	solemnly affirm as under:-				-	
	(1) That I/we am/are the only heir(s) of la	te			(deceas	sed
	depositor) who died at	on			I/We ald	one
	represent the estate of late				(deceas	sed
	depositor).					
	(2) That late		•		,	
	any will and therefore I/we am/are the	only suc	cessor(s)	to the e	state of the s	aid
	deceased depositor/s.					

- 1. .....(Signature) 2.
- 3.
- 4.

Deponents

**Verification:** I/we, the above named deponents do hereby verify on solemn affirmation in...... Name of Place) that the contents of this affidavit are true to my/our knowledge and nothing material has been concealed.

Dated:-

1. ....(Signature) 2. 3. 4.

Deponents

Attested

Oath Commissioner/Notary Public