

# Affidavit of Estate Tax

(To be recorded in the county of residence of the decedent)

20051207000634940 1/1 \$11.00  
Shelby Cnty Judge of Probate, AL  
12/07/2005 04:04:14PM FILED/CERT

(this space available for case style of estate probate proceeding)

(for official use only)

STATE OF Alabama

COUNTY OF Shelby

I, the undersigned, Mary S. Bowman, do hereby state:  
(print name of personal representative)

1. I am the Personal Representative as defined in Section 8-6-140(5), *Code of Alabama 1975*, as the case may be, of the Estate of Haskins W. Bowman.  
(print name of decedent)

2. The decedent referenced above, whose Social Security Number is [REDACTED] died on 04 / 13 / 04, and was domiciled, as defined in *Caheen vs. Caheen*, 233 Ala. 494, 172 So. 618 (1937), at the time of death, at Brookwood Medical Center in the county of Jefferson and state of Alabama.

On date of death, the decedent was (check one):  a U.S. citizen  not a U.S. citizen.

3. A federal estate tax return (federal Form 706 or 706-NA) (check one):  
 is not required  is required to be filed for the Estate.

Under penalties of perjury, I declare that I have read this Affidavit and that the facts stated are true. This form is being filed in accordance with Section 40-15-13, *Code of Alabama 1975*.

Executed this 7<sup>th</sup> day of December, 20 05.

Signature: Mary S. Bowman  
Print Name: Mary S. Bowman  
Mailing Address: 64 Mallard Circle  
Indian Springs, AL 35124  
Telephone: (205) 988-0086

STATE OF Alabama

COUNTY OF Shelby

Sworn to (or affirmed) and subscribed before me by Mary S. Bowman  
on this 7<sup>th</sup> day of December, 20 05.

Signature of Notary: Deborah L. Horton

Personally Known \_\_\_\_\_

Or Produced Identification

Type of Identification Produced Al. Drivers Lic.

DEBORAH L. HORTON  
NOTARY PUBLIC STATE AT LARGE  
COMMISSION EXPIRES  
MARCH 28, 2008

(Print, Type, or Stamp Name of Notary)