



**INSTRUCTIONS FOR COMPLETING
THE CALIFORNIA SMALL ESTATE AFFIDAVIT**

Use this form to complete the Motion Picture Industry Health Plan (“Plan”) affairs of a Participant who has died without naming a personal representative or successor.

You must complete the form and follow its directions in full, otherwise the Plan cannot accept your Affidavit.

Affiant – The name of the affiant (i.e., the one who signs the affidavit) must be printed in the blank.

- The first sentence of **paragraph 1** calls for the name of the decedent, as well as the date and place of the decedent’s death.
- Under **paragraph 2**, the Affiant cannot complete and present the Affidavit unless the decedent has been deceased for at least 40 days.
- The Affidavit specifically describes the property being transferred to the successor as “any applicable refund of premiums paid under the Motion Picture Industry Health Plan.”
- **The Affidavit must be signed and notarized, and a certified copy of the death certificate must be attached to it.**
- **Multiple successors are permitted**, in which case the Affidavit can be changed throughout to reflect multiple Affiants signing the one Affidavit.
- The name to be inserted in **paragraph 6** is the same as the name of the person signing the Affidavit, who must be the person claiming to be the successor to the decedent.
- Successors to **out-of-state decedents** for whom probate or intestacy proceedings are not pending, and who did not have trusts or HIPAA personal representatives, should seek counsel to prepare their state’s version of the attached Affidavit.

In addition, the Motion Picture Industry Health Plan must receive a copy of one of the following forms of identification from the person presenting the Affidavit:

1. A current California driver’s license, or an expired California driver’s license issued no more than five years before the date of the Affidavit.
2. A current U.S. passport, or an expired U.S. passport issued no more than five years before the date of the Affidavit.
3. Any of the following documents if the document is current or issued no more than five years before the date of the Affidavit, contains a photograph and physical description of the person named on it, is signed by the person and bears a serial number:
 - A foreign passport stamped by the United States Immigration and Naturalization Service
 - A driver’s license issued by a state other than California
 - An ID card issued by a state other than California
 - An ID card issued by any branch of the U.S. Armed Forces

If you have questions about this form, call the Plan Office at (855) 275-4674.

- 8. No other person has a superior right to the interest of the decedent in the Described Property.
- 9. The Affiant requests that the Described Property be paid, delivered or transferred to the Affiant.

The Affiant affirms under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Dated: _____

By: _____

Print Name: _____

Dated: _____

By: _____

Print Name: _____

Dated: _____

By: _____

Print Name: _____

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

STATE OF _____)

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COUNTY OF _____)

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Subscribed and sworn to (or affirmed) before me on this ____ day of _____, 20 __, by _____, proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

Signature _____

(Seal)

**Return fully completed form to:
Motion Picture Industry Health Plan
Attn: Claims Review Unit
P.O. Box 1999
Studio City, CA 91614-0999**