

**Surrogate's Court of the State of New York**

County of Proceeding \_\_\_\_\_

In The Matter of the Estate of \_\_\_\_\_ Deceased.  
First and Last Name

The undersigned, [ ] a fiduciary, or [ ] an attorney of record certifies that the following firearms, as defined by Section 265.0 of the Penal Law, make up part of the decedent's estate.

Name of Fiduciary or Attorney: \_\_\_\_\_  
(Address, if changed): \_\_\_\_\_

	<b>Make:</b>	<b>Model:</b>	<b>Caliber or Gauge:</b>	<b>Serial #:</b>	<b>Valuation:</b>
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
<b>ROWS 1 - 12 FIREARM VALUE:</b>				<b>FIREARM GRAND VALUE:</b> <i>(as indicated in section F2 of Inventory or Assets)</i>	
<input type="checkbox"/> ( mark box if more entries are necessary and attach any extra pages )					

**Fiduciary or Attorney**

**Certified to be true on** \_\_\_\_\_

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Telephone \_\_\_\_\_

\_\_\_\_\_  
*Signature*  
\_\_\_\_\_  
*Print Name*

A copy of this inventory must also be filed with DCJS at:

*Division of Criminal Justice Services  
Alfred E. Smith Building  
80 South Swan Street  
Albany, NY 12110*

*Firearms Inventories filed with the Surrogate's Court will be kept in a secure location separate from the estate file and will be made available for inspection only to persons interested in the proceeding and their counsel, unless otherwise ordered by the Court.*

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	<b>Make:</b>	<b>Model:</b>	<b>Caliber or Gauge:</b>	<b>Serial #:</b>	<b>Valuation:</b>
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					
27					
28					
29					
30					
<b>ROWS 13 - 30 FIREARM VALUE:</b>				<b>FIREARM GRAND VALUE:</b> <i>(as indicated in section F2 of Inventory or Assets)</i>	
<input type="checkbox"/> ( mark box if more entries are necessary and attach any extra pages )					

**Fiduciary or Attorney**

**Certified to be true on** \_\_\_\_\_

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Telephone \_\_\_\_\_

\_\_\_\_\_  
*Signature*  
 \_\_\_\_\_  
*Print Name*

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	<b>Make:</b>	<b>Model:</b>	<b>Caliber or Gauge:</b>	<b>Serial #:</b>	<b>Valuation:</b>
31					
32					
33					
34					
35					
36					
37					
38					
39					
40					
41					
42					
43					
44					
45					
46					
47					
48					
<b>ROWS 31 - 48 FIREARM VALUE:</b>				<b>FIREARM GRAND VALUE:</b> <i>(as indicated in section F2 of Inventory or Assets)</i>	
<input type="checkbox"/> ( mark box if more entries are necessary and attach any extra pages )					

**Fiduciary or Attorney**

Certified to be true on \_\_\_\_\_

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Telephone \_\_\_\_\_

\_\_\_\_\_  
*Signature*  
 \_\_\_\_\_  
*Print Name*

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	<b>Make:</b>	<b>Model:</b>	<b>Caliber or Gauge:</b>	<b>Serial #:</b>	<b>Valuation:</b>
49					
50					
51					
52					
53					
54					
55					
56					
57					
58					
59					
60					
61					
62					
63					
64					
65					
66					
<b>ROWS 49 - 66 FIREARM VALUE:</b>				<b>FIREARM GRAND VALUE:</b> <i>(as indicated in section F2 of Inventory or Assets)</i>	
<input type="checkbox"/> ( mark box if more entries are necessary and attach any extra pages )					

**Fiduciary or Attorney**

Certified to be true on \_\_\_\_\_

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Telephone \_\_\_\_\_

\_\_\_\_\_  
*Signature*  
 \_\_\_\_\_  
*Print Name*

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	<b>Make:</b>	<b>Model:</b>	<b>Caliber or Gauge:</b>	<b>Serial #:</b>	<b>Valuation:</b>
67					
68					
69					
70					
71					
72					
73					
74					
75					
76					
77					
78					
79					
80					
81					
82					
83					
84					
<b>ROWS 67 - 84 FIREARM VALUE:</b>				<b>FIREARM GRAND VALUE:</b> <i>(as indicated in section F2 of Inventory or Assets)</i>	
<input type="checkbox"/> ( mark box if more entries are necessary and attach any extra pages )					

**Fiduciary or Attorney**

Certified to be true on \_\_\_\_\_

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Telephone \_\_\_\_\_

\_\_\_\_\_  
*Signature*  
 \_\_\_\_\_  
*Print Name*

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	<b>Make:</b>	<b>Model:</b>	<b>Caliber or Gauge:</b>	<b>Serial #:</b>	<b>Valuation:</b>
85					
86					
87					
88					
89					
90					
91					
92					
93					
94					
95					
96					
97					
98					
99					
100					
<b>ROWS 85 - 100 FIREARM VALUE:</b>				<b>FIREARM GRAND VALUE: (as indicated in section F2 of Inventory or Assets)</b>	
<input type="checkbox"/> ( mark box if more entries are necessary and attach any extra pages )					

**Fiduciary or Attorney**

**Certified to be true on** \_\_\_\_\_

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Telephone \_\_\_\_\_

\_\_\_\_\_  
*Signature*  
 \_\_\_\_\_  
*Print Name*