

# Polish National Alliance of the U.S. of N. A.



## AFFIDAVIT OF LOSS

1. I, (full name) \_\_\_\_\_, state on oath, that  
  
(name of the deceased) \_\_\_\_\_  
  
passed away on (date) \_\_\_\_\_
2. I state on oath, that the decedent was a member of the Polish National Alliance of the U.S. of N.A. insured under Certificate No: \_\_\_\_\_,  
That the said certificate has been lost and cannot be located.
3. Should above-mentioned, original certificate ever to be recovered, it should be promptly surrendered to the Polish National Alliance of the U.S. of N.A., and no further claim for the proceeds thereof shall be made.

\_\_\_\_\_  
Signature of Affiant

\_\_\_\_\_  
Social Security Number

Address: \_\_\_\_\_

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

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**Endorsed by a Notary Public or Witness other than the Beneficiary:**

**Witnessed by:** Name \_\_\_\_\_

Date: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_