|  |  |  |
| --- | --- | --- |
| **Legal estate(s)/ Trust(s) details** |  | **Man[2]/Woman[3] details** |
| **ID #:** |  |  | **Name:** |  |
|  |  |  | **House:** |  |
|  |  |  | **Live born date:** |  |

|  |
| --- |
| **Man[2]/Woman[3] vitals:** |
| Height: |  |
| Weight: |  |
| Pulse Rate: |  |
| Blood Pressure: |  |
| Blood Type: |  |
| Respiration Rate: |  |

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, declare that I have seen and checked the vitals of the man[2]/woman[3] known as \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, of the house “\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_”, and above are the results.

I declare that the man[2]/woman[3] mentioned above is alive[1].

[1] "alive" refers to a flesh and blood, soul possessing, breathing and feeling entity

[2] “man” refers to a being with a biological male body (XY chromosomes/born with a male reproductive organs) of any age

[3] “woman” refers to a being with a biological female body (XX chromosomes/born with a womb) of any age

|  |  |
| --- | --- |
| Date: |  |
| Time: |  |

Affirmed by