

# AFFIDAVIT OF DEATH AND HEIRSHIP

(FILL IN ALL BLANKS)

STATE OF \_\_\_\_\_ as:  
 COUNTY OF \_\_\_\_\_ }  
 (Name) \_\_\_\_\_ of (City, State) \_\_\_\_\_

of lawful age, being first duly sworn according to law, on oath says:

That the statements hereinafter set forth, including answers to questions propounded, constitute a true, correct and complete statement of the family history of the person hereinafter named as "decedent" and of the estate of such decedent.

Name of Decedent \_\_\_\_\_

Date decedent died \_\_\_\_\_ Where? \_\_\_\_\_

Did decedent leave a Will? \_\_\_\_\_ If yes, has same been probated? \_\_\_\_\_

Or has other administration proceedings been had on decedent's estate? \_\_\_\_\_

If yes, when? \_\_\_\_\_ Where? \_\_\_\_\_

Were there any unpaid debts or obligations due by decedent at the time of his/her death? If so, give the following information:

To Whom Owing	Amount	Nature of Debt	Paid/Unpaid Now

Was decedent surety on any bond at the time of his/her death? \_\_\_\_\_

Were there any suits pending, or any judgments rendered in any court, against decedent at the time of death? \_\_\_\_\_

If so, state briefly the nature, amount involved and parties to the action: \_\_\_\_\_

Was decedent married or single at time of death? \_\_\_\_\_

If married, name of surviving spouse: \_\_\_\_\_

Was decedent ever married to any other than above-named person? \_\_\_\_\_

If so, give the following information: (List names in order of marriage):

Name of Spouse	Living or Dead	Divorced	Date of Death or Divorce

Was surviving spouse ever married to any other than the decedent? \_\_\_\_\_

If so, give the following information: (List names in order of marriage):

Name of Spouse	Living or Dead	Divorced	Date of Death or Divorce

If decedent had any children by any spouse, or adopted any children, give the following information:

Name of Child	Age	Address	Living/Dead	Date of Death	By Which Spouse

If a deceased child left descendents, give the following information:

	Name of Child	Age	Address	Living/Dead	Date of Death
Name of Deceased Child					

	Name of Child	Age	Address	Living/Dead	Date of Death
Name of Deceased Child					

	Name of Child	Age	Address	Living/Dead	Date of Death
Name of Deceased Child					

If surviving spouse had any children by a spouse other than the decedent, or adopted any children, give the following information:

Name of Child	Age	Address	Living/Dead	Date of Death	By Which Spouse

If decedent left no surviving spouse, and no children or descendants of deceased children, then please furnish the following information:

Name of Parents	Address	Living/Dead	Date of Death
Father			
Mother			

Give names of brothers and sisters of decedent (include half siblings):

Name	Relation	Address	Living/Dead	Date of Death

Give names of children of deceased brothers and sisters:

Name of Deceased Brother or Sister	Name of Child	Age	Address	Living/Dead	Date of Death

Name of Deceased Brother or Sister	Name of Child	Age	Address	Living/Dead	Date of Death

Name of Deceased Brother or Sister	Name of Child	Age	Address	Living/Dead	Date of Death

Here briefly state facts and circumstances (such as being a relative of, or attorney or agent for, deceased) which will show basis and source of information herein before given:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ Day of \_\_\_\_\_, Year \_\_\_\_\_

\_\_\_\_\_ Affiant

My commission expires: \_\_\_\_\_

NOTARY PUBLIC

### SUPPORTING AFFIDAVIT

(FILL IN ALL BLANKS)

STATE OF \_\_\_\_\_ as:  
 COUNTY OF \_\_\_\_\_ }  
 (Name) \_\_\_\_\_ of (City, State) \_\_\_\_\_

of lawful age, being first duly sworn according to law, on oath says:

That this affiant was well and personally acquainted with \_\_\_\_\_  
 (being the person described as "decedent" in the Affidavit hereinabove set forth) in his/her lifetime; that this affiant has read the foregoing Affidavit of Death and Heirship, knows the contents thereof, and that each and every statement therein contained is true, to the best of his/her knowledge and belief.

Subscribed and sworn to before me this \_\_\_\_\_ Day of \_\_\_\_\_, Year \_\_\_\_\_

\_\_\_\_\_ Affiant

My commission expires: \_\_\_\_\_

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