AFFIDAVIT OF DEATH AND HEIRSHIP

“Decedent”

Before me, the undersigned authority, on this day, personally appeared: \_\_\_\_\_\_\_(“Affiant”), who resides at , who, being of lawful age, being first duly sworn, upon his/her oath deposes and says:

My name is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. I am personally familiar with the family and martial history of\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Decedent. I bear the following relationship to Decedent, to-wit: .

1. I knew the Decedent from until .
   1. Decedent died on at or near \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ being years of age at the time of death.
   2. At the time of death, Decedent resided at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. The Decedent did/did not leave a Will which was/was not admitted to probate. Probate proceedings have commenced in the following Court/County/State:
3. An heirship determination proceeding has/has not been conducted in a court to determine the heirship of Decedent in the following court, city, county/parish:
4. No Administration proceedings have commenced for the estate and Administration is/is not anticipated in the future.
5. Decedent did/did not leave any unpaid debts. Those debts remaining will be paid from the following account/fund:
6. At the time of Decedent’s death there were/were not lawsuits pending against the Decedent.
7. At the time of death, to the best of my knowledge Decedent owned an interest in the real property described on the attached “Exhibit A” (the “Property”):
   1. The Property was/was not the homestead of the Decedent on the date of his/her death.
   2. The Property is/is not now occupied as the homestead of Decedent’s surviving spouse.
   3. The Decedent owned the Property as Community/Separate Property.
   4. The Decedent acquired the Property by:
   5. The Decent acquired the Property on:
8. Decedent was/was not married at the time of his/her death. The Decedent’s surviving spouse is:
9. Name of surviving spouse:
10. Address of surviving spouse:
11. Date of Marriage:
12. If not living, give date of death:
13. The Decedent’s prior marital history is as follows:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of Spouse/**  **Address** | **Living or Dead** | **Date of Marriage** | **Date of**  **Death** | **Date of Divorce** |
|  |  |  |  |  |
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|  |  |  |  |  |
|  |

1. The Decedent had the following natural born and adopted children still living at the time of his/her death:

*(If there are none, please state that below. If additional space is needed, please provide information as an attachment.)*

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of Child/**  **Address** | **Date of Birth** | **Name of other parent** | **If Deceased, Give Date of Death** |
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1. The Decedent had the following **deceased** children and grandchildren born of said deceased children:

*(If there are none, please state that below. If additional space is needed, please provide information as an attachment.)*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name of Deceased Son or Daughter and date of death** | **Name of other Parent** | **Names of Children of Deceased Son or Daughter** | **Address** | **Age** | **If Deceased, Give Date of Death** |
|  |  |  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **Name of Deceased Son or Daughter and date of death** | **Name of other Parent** | **Names of Children of Deceased Son or Daughter** | **Address** | **Age** | **If Deceased, Give Date of Death** |
|  |  |  |  |  |  |
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1. To the best of my knowledge, the following information is correct for the Decedent’s parents:

|  |  |  |
| --- | --- | --- |
| **Decedent’s Parents** | **Parent’s Name/**  **Address** | **If Deceased, give Date of Death** |
| **Mother** |  |  |
|  |
| **Father** |  |  |
|  |

1. The Decedent had the following siblings:

*(If there are none, please state that below. If additional space is needed, please provide information as an attachment.)*

|  |  |  |
| --- | --- | --- |
| **Name of Brother or Sister/**  **Address** | **Date of Birth** | **If Deceased, give Date of Death** |
|  |  |  |
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1. The Decedent had the following nieces and nephews born to the deceased siblings identified above:

*(If there are none, please state that below. If additional space is needed, please provide information as an attachment.)*

|  |  |  |
| --- | --- | --- |
| **Name of Niece or Nephew/**  **Address** | **Date of Birth** | **Name of Deceased Parent of Niece or Nephew** |
|  |  |  |
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1. To the best of my knowledge, the Decedent’s Estate is valued at approximately $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.
2. There is, to the best of my knowledge, no unpaid inheritance tax or estate tax due on the estate except:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Signed this \_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_, 20\_\_

**Signature of Affiant**

State of

County/Parish of

SUBSCRIBED AND SWORN to before me this \_\_\_\_\_\_\_day of\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_\_.

My commission expires:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Notary Public

**CORROBORATING AFFIDAVIT**

**(To be signed by someone other than the person making the foregoing affidavit. Corroborating Affiant may not be an heir named above)**

State of

County/Parish/District of

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, of lawful age, being first duly sworn, upon his oath states: The information given in the above and foregoing affidavit is true, and accurate, to the personal knowledge of this affiant.

Signature of Corroborating Affiant

SUBSCRIBED AND SWORN to before me this \_\_\_\_\_\_\_\_\_\_\_\_\_day of\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_.

My commission expires:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Notary Public