

INFORMATION FOR AN AFFIDAVIT OF HEIRSHIP

THIS IS AN INFORMATION FORM ONLY – THIS IS NOT THE AFFIDAVIT OF HEIRSHIP. THE INFORMATION YOU GIVE ON THIS FORM WILL BE USED BY THIS OFFICE IN PREPARING THE AFFIDAVIT OF HEIRSHIP.

NOTICE: PLEASE PRINT ALL INFORMATION

AFFIANT – Person who is giving the information on this form.

1. **Information about the Affiant.** In the space provided please print the following information about the affiant:

Name: _____

Address: _____

Relationship to deceased: _____

Relationship with deceased began in what year? _____

2. **Information about the Deceased.**

Full name of deceased: _____

Deceased's date of birth: _____

Deceased's place of birth: _____

Deceased's date of death: _____

Deceased's place of death (city, state): _____

Deceased's age at time of death: _____

Deceased's address at time of death: _____

At date of death, deceased was:

_____ Married _____ Widowed _____ Divorced _____ Never Married

Did Deceased leave a Will? _____ No _____ Yes

If the answer is "Yes" Provide a copy of the Will with this form

Date Will was signed: _____

Was administrator taken out on estate of deceased? _____ No _____ Yes

3. **Information about the Deceased's marriages:**

Number of times deceased was married: _____

FIRST MARRIAGE:

Name of FIRST spouse: _____

Date of Marriage: _____

Place of Marriage: _____

Marriage terminated by: _____ Death _____ Divorce

Date and Place of Termination: _____

Number of Children born to this marriage: _____

Child born to or adopted by deceased during first marriage: Name, Place of birth, date of birth and/or date of adoption, child's current spouse's name and current address:

LIVING CHILDREN:

1. Name: _____ Birth date: _____

Current Address: _____

Names of both parents: _____

Name of Spouse: _____

2. Name: _____ Birth date: _____

Current Address: _____

Names of both parents: _____

Name of Spouse: _____

3. Name: _____ Birth date: _____

Current Address: _____

Names of both parents: _____

Name of Spouse: _____

4. Name: _____ Birth date: _____

Current Address: _____

Names of both parents: _____

Name of Spouse: _____

(if additional space is needed, please use the back of this page)

DECEASED CHILDREN:

Name: _____ Birth date: _____

Date of death: _____ Name of other parent: _____

Place of Death: _____

Address at time of death: _____

Names of any children born to or adopted by this deceased child:

1. Name: _____ Birth Date: _____

2. Name: _____ Birth Date: _____

SECOND MARRIAGE:

Name of SECOND spouse: _____

Date of Marriage: _____

Place of Marriage: _____

Marriage terminated by: _____ Death _____ Divorce

Date and Place of Termination: _____

Number of Children born to this marriage: _____

Child born to or adopted by deceased during second marriage: Name, Place of birth, date of birth and/or date of adoption, child's current spouse's name and current address:

LIVING CHILDREN:

1. Name: _____ Birth date: _____

Current Address: _____

Names of both parents: _____

Name of Spouse: _____

2. Name: _____ Birth date: _____

Current Address: _____

Names of both parents: _____

Name of Spouse: _____

3. Name: _____ Birth date: _____

Current Address: _____

Names of both parents: _____

Name of Spouse: _____

4. Name: _____ Birth date: _____
Current Address: _____
Names of both parents: _____
Name of Spouse: _____
(if additional space is needed, please use the back of this page)

DECEASED CHILDREN:

Name: _____ Birth date: _____
Date of death: _____ Name of other parent: _____
Place of Death: _____
Address at time of death: _____

Names of any children born to or adopted by this deceased child:

1. Name: _____ Birth Date: _____
2. Name: _____ Birth Date: _____

4. **INFORMATION ABOUT THE ESTATE:**

Are or were there any debts to be paid (This included any real property) ?

_____ Yes _____ No

Are there any estate or inheritance taxes to be paid from the estate of the Decedent?

_____ Yes _____ No

At date of death, estimate the value of the deceased's estate: \$ _____

REAL PROPERTY OWNED BY THE DECEASED AT THE TIME OF DEATH:

The deed to any property owned by the deceased at the time of death will have a legal description. You may send a copy of the deed or write the legal description from the deed below.

At the time of death, was the property the homestead of the deceased:

_____ Yes _____ No

Legal description of deceased's property:

(Homestead)

Lot _____ Block _____

(Other Property)

Lot _____ Block _____

5. **INFORMATION ABOUT WITNESS:**

QUALIFICATIONS FOR A WITNESS

Has no interest in the estate (not a spouse, child or other individual who would gain from deceased's estate).

Knew the deceased long enough to be able to verify the facts stated in the Affidavit of Heirship as true and correct (during deceased's childbearing years).

Is willing to read the Affidavit and swear to the correctness of the information in front of a Notary Public.

WITNESSES ARE NOT TO SIGN THIS PAGE

AFFIANT SHOULD PRINT THE FOLLOWING INFORMATION FOR THE TWO PEOPLE WHO SHALL BE WITNESSES:

WITNESS #1:

Name: _____

Address: _____

What year did the relationship with deceased begin? _____

How is the witness related to or how does the witness know the deceased?

WITNESS #2:

Name: _____

Address: _____

What year did the relationship with deceased begin? _____

How is the witness related to or how does the witness know the deceased?
