

AFFIDAVIT OF HEIRSHIP INFORMATION

Please provide the following information in connection with the preparation of an Affidavit of Disinterested Person. It is necessary that we have **two** credible persons who were acquainted with your family and who will execute an Affidavit. After completing the form, please return it to our office. Our office will then prepare and forward the prepared Affidavits for execution by Affiants.

Value of Decedent's Estate: _____

Has an estate administration been opened in any state? _____

Did Decedent leave a valid Will? _____

Have all debts of the estate been paid? _____

1ST DISINTERESTED PERSON:

Name: _____

Address: _____

County of Residence: _____

Relationship to Decedent/Decedent's Spouse/or Both

(Friend, Neighbor, Pastor, Doctor, Etc.): _____

Length of time Affiant was acquainted with Decedent and your family: _____

2ND DISINTERESTED PERSON:

Name: _____

Address: _____

County of Residence: _____

Relationship to Decedent/Decedent's Spouse/or Both

(Friend, Neighbor, Pastor, Doctor, Etc.): _____

Length of time Affiant was acquainted with Decedent and your family: _____

DECEDENT'S INFORMATION

Full Name of Decedent: _____

Date of Birth: _____

Place of Birth

(city, county & state): _____

Date of Death: _____

Place of Death

(city, county & state): _____

Legal residence at date of death (city, county & state): _____

Length of Time as Resident in County: _____

REAL PROPERTY OWNED BY DECEDENT

Legal Description of Property (Lot and Block Description or Attach copy of Deed/Title

Policy): _____

DECEDENT'S SPOUSE(S) INFORMATION

1ST Marriage (or only marriage):

Full Name of Spouse: _____

Date of Marriage: _____ Place of Marriage: _____ [city]
_____ [state]

Did Decedent's spouse predecease Decedent? _____ Date of Death: _____
Age of Death: _____ Place of Death: _____ [city]
_____ [state]

Did Decedent divorce spouse? _____ Date of Divorce: _____
Place of Divorce: _____ [city]
_____ [state]

2ND Marriage:

Full Name of Spouse: _____

Date of Marriage: _____ Place of Marriage: _____ [city]
_____ [state]

Did Decedent's spouse predecease Decedent? _____ Date of Death: _____
Age of Death: _____ Place of Death: _____ [city]
_____ [state]

Did Decedent divorce spouse? _____ Date of Divorce: _____
Place of Divorce: _____ [city]
_____ [state]

CHILDREN OF 1ST MARRIAGE (or only marriage):

NAME: _____

Address *(if deceased, please omit):* _____

Current Marital Status: _____

Date of Birth: _____ **Date of Death** *(if applicable):* _____

If deceased, surviving children, and their dates of birth:

Name: _____ **Date of Birth:** _____

Name: _____ **Date of Birth:** _____

NAME: _____

Address *(if deceased, please omit):* _____

Current Marital Status: _____

Date of Birth: _____ **Date of Death** *(if applicable):* _____

If deceased, surviving children, and their dates of birth:

Name: _____ **Date of Birth:** _____

Name: _____ **Date of Birth:** _____

NAME: _____

Address *(if deceased, please omit):* _____

Current Marital Status: _____

Date of Birth: _____ **Date of Death** *(if applicable):* _____

If deceased, surviving children, and their dates of birth:

Name: _____ **Date of Birth:** _____

Name: _____ **Date of Birth:** _____

CHILDREN OF 2ND MARRIAGE:

NAME: _____

Address *(if deceased, please omit):* _____

Current Marital Status: _____

Date of Birth: _____ **Date of Death** *(if applicable):* _____

If deceased, surviving children, and their dates of birth:

Name: _____ **Date of Birth:** _____

Name: _____ **Date of Birth:** _____

NAME: _____

Address *(if deceased, please omit):* _____

Current Marital Status: _____

Date of Birth: _____ **Date of Death** *(if applicable):* _____

If deceased, surviving children, and their dates of birth:

Name: _____ **Date of Birth:** _____

Name: _____ **Date of Birth:** _____