# Affidavit of Heirship

I _____ ("Affiant"), residing at _____, _____, _____ _____, duly sworn, and state:

1. I am over the age of eighteen years and have personal knowledge of the following facts.

2. I knew the decedent, _____, who died on _____, from _____ to _____. _____ was my _____. _____'s place of death was _____, _____.

3. _____ left the following items of real property and did not leave a Last Will and Testament:

4. At the time of death, _____'s marital history was as follows:

5. At the time of death, _____'s sole surviving heirs were as follows:

I declare that, to the best of my knowledge and belief, the information herein is true, correct and complete as of _____, the date I affixed my signature to this Affidavit.

_____

STATE OF _____, COUNTY OF _____, ss:

_____
Notary Public

_____
Title (and Rank)

My commission expires _____

Draft