

Samson
Two West Second Street
Tulsa, OK 74103
www.samson.com

AFFIDAVIT OF HEIRSHIP INSTRUCTIONS

ENCLOSED IS A COPY OF SAMSON'S AFFIDAVIT OF HEIRSHIP.

THIS AFFIDAVIT MUST BE COMPLETED BY A PERSON WHO IS NOT AN HEIR OF THE DECEASED, WHO IS NOT INTERESTED IN THE DECEASED'S PROPERTY, AND SOMEONE WHO WILL NOT GAIN FINANCIALLY FROM THE DECEASED'S ESTATE. THE AFFIDAVIT MUST BE SIGNED BY THE PERSON COMPLETING THE FORM, AND HIS SIGNATURE NOTARIZED BY A NOTARY PUBLIC. THE AFFIDAVIT MUST THEN BE SENT TO THE COUNTY, WHERE THE PROPERTY IS LOCATED, FOR RECORDING.

PLEASE ATTACH TO THE AFFIDAVIT OF HEIRSHIP:

- 1) A COPY OF THE DECEASED'S CERTIFIED DEATH CERTIFICATE.
- 2) IF DECEASED LEFT A WILL, A COPY OF THE DECEASED'S WILL.
- 3) THE COMPLETE ADDRESS FOR ALL HEIRS.

RETURN THE FULLY COMPLETED, NOTARIZED, & RECORDED AFFIDAVIT OF HEIRSHIP TO:

SAMSON
ATTENTION: OWNER RELATIONS
P.O. Box 21035
TULSA OK 74121

IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT SAMSON'S OWNER RELATIONS DEPARTMENT BY PHONE AT (800) 735-2830 OR BY EMAIL AT OwnerRelations@samson.com. THANK YOU FOR YOUR ASSISTANCE.

This Affidavit must be sent for recording to each county where the Decedent had property.

Property: _____

AFFIDAVIT OF HEIRSHIP

 (Decedent)

STATE OF _____
 COUNTY OF _____

_____, whose address is _____
 hereinafter referred to as "Affiant" being of lawful age and being duly sworn, upon oath deposes and says that (s)he was well acquainted with _____, hereinafter referred to as the "Decedent", and that the answers and statements given in the following questionnaire are based upon Affiant's personal knowledge and are true and correct.

1. How long did you know the Decedent? _____
 2. What was your relationship to the Decedent? _____
 3. Complete the following sentences:
 Decedent's home was at _____
 Decedent died at the age of _____ on _____
 Decedent died at _____, State of _____
 4. Did Decedent leave a will? _____ If Decedent left a will, attach a copy hereto.
 5. Have probate proceedings commenced? _____ If so, complete the following to the best of your knowledge: Proceedings were commenced in _____ County, State of _____
 Name and address of executor or administrator _____
 6. Are there any debts still owing on the Decedent's estate? _____ If so, will the size of the estate be sufficient in your opinion to pay such debts? _____
 7. Have all Federal and State Inheritance taxes been paid (If none due, state "None Due")? _____
 8. Was the interest in the above described property community or separate? _____
 Separate property is inherited property or property owned prior to marriage.
 Community property is property purchased by, or deeded to both husband & wife during the marriage.
 9. Was the property of the Decedent as described on this affidavit a homestead? _____
 10. At the time of death, was Decedent single, married, divorced, a widow or widower and, if married, what was the Decedent's surviving spouse's name? _____
 What is the surviving spouse's address? _____
 11. If the Decedent's spouse is deceased, when did the spouse die? _____
 12. How many times was the Decedent married? _____ If Decedent was married more than once, complete the following:
- | Name of Former Spouse | Date Terminated | Death or Divorce | Present Address or Date of Death |
|-----------------------|-----------------|------------------|----------------------------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

PLEASE PROVIDE COMPLETE ADDRESSES FOR ALL HEIRS. ON A SEPARATE PAGE, PROVIDE SOCIAL SECURITY NUMBERS. DO NOT INCLUDE THE PAGE OF SOCIAL SECURITY NUMBERS WHEN YOU SUBMIT THE DOCUMENT FOR RECORDING (TO PROTECT YOUR PRIVACY).

13. What was the total number of Decedent's children, both natural and adopted? _____ Complete the following table with respect to all children of the Decedent, whether living or dead, natural or adopted:

<u>Name of Child</u>	<u>Date of Birth</u>	<u>Name of Other Parent</u>	<u>Present Address or Date of Death</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

14. Were any of Decedent's children adopted and, if so, which ones and when?

15. Complete the following table with respect to all children of every deceased child (if any) of the Decedent:

<u>Name of Decedent's Deceased Child</u>	<u>Children of Deceased Child</u>	<u>Date of Birth</u>	<u>Present Address or Date of Death</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

16. If Decedent was not survived by any children or grandchildren, then give below the names and addresses of Decedent's father, mother and all brothers, sisters, nieces and nephews who are still living:

<u>Name of Relative</u>	<u>Relationship</u>	<u>Age</u>	<u>Present Address</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Affiant's Signature

Scribed and sworn to before me this _____ day of _____

Notary Public

(SEAL)

My Commission Expires _____

ATTACH COPY OF DEATH CERTIFICATE