

<p>Prepared by:</p> <p>If recorded, return to:</p>	<p>)</p> <p>)</p> <p>)</p> <p>)</p> <p>)</p> <p>)</p> <p>)</p> <p>)</p> <p>)</p> <p>)</p> <p>)</p> <p>_____above this line for official use only_____</p>
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HEIRSHIP AFFIDAVIT

(Heirship of _____ Deceased)

STATE OF DISTRICT OF)
 COLUMBIA)
 COUNTY OF _____

BEFORE ME, the undersigned authority, on this day personally appeared _____, ("AFFIANT") who is personally known to me (or, if not being personally known to me, did confirm his/her identity presenting _____ as identification (i.e. drivers license #), and appearing to be fully competent and of sufficient age, upon being duly sworn, stated upon Affiant's oath the following:

1. My name is _____ (insert name of affiant), and I live at _____ (insert address of affiant's residence). I am personally familiar with the family and marital history of _____ ("Decedent") (insert name of decedent), and I have personal knowledge of the facts stated in this affidavit.

2. I knew decedent from _____ (insert date) until _____ (insert date). I was personally well acquainted with the named decedent during his/her lifetime.

3. The Decedent died on _____ (insert date of death) at the following place of death: _____ (City), _____ (County), _____ (State) (insert place of death). At the time of decedent's death, decedent's residence address was _____ (Street), _____ (City), District of Columbia, _____ (Zip). (insert address of decedent's residence).

4. I was well acquainted with the family and near relatives of the said decedent, and with all those who would under the laws of the State of District of Columbia, be his/her heirs. The following statements and the information contained herein, including my answers to named questions below, are based upon my personal knowledge and are true and correct.

QUESTION 1 - Did the decedent leave a will? **ANSWER:** YES/NO

QUESTION 2 - If the decedent left a will, has the will been admitted to probate?

ANSWER: YES/NO/NA. If YES, at what place, and when?

ANSWER: _____ COUNTY, District of Columbia, _____ CAUSE NUMBER
 _____ DATE

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QUESTION 3 - If the decedent left no will, has an administrator or personal representative been appointed for the estate of said deceased? **ANSWER:** YES/NO

QUESTION 4 - If an administrator or personal administrator has been appointed, give the County in which the proceedings are pending, and the name and address of the administrator or personal representative.

ANSWER:

COUNTY	NAME	ADDRESS
CAUSE NUMBER		

QUESTION 5 - Give the name and address of the surviving widow or widower of decedent.

ANSWER:

NAME	ADDRESS	If not now living, state date of death:

QUESTION 6 - If the decedent was married more than once, give the name(s) of the former husband or wife, and state whether said former spouse is dead or divorced.

ANSWER:

NAME	STATUS (Dead or Divorced)

QUESTION 7 - Give the names and places of residence of all the surviving children of deceased, together with the other information called for:

ANSWER: (Give names of surviving children only)

NAME OF CHILD	ADDRESS	DATE OF BIRTH	IF NOT LIVING DATE OF DEATH	HUSBAND OR WIFE NAME

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QUESTION 8 - Give the name and address of any deceased children of the decedent, together with the other information called for:

ANSWER:

NAME OF CHILD	DATE OF BIRTH	DATE OF DEATH	SURVIVING HUSBAND OR WIFE NAME	DATE OF DEATH OF SPOUSE, IF APPLICABLE

QUESTION 9 - Give the names and addresses of the children of any deceased son or daughter of the decedent:

ANSWER:

NAME OF CHILD	ADDRESS OF IF NOT LIVING DATE OF DEATH	DATE OF BIRTH	NAME OF FATHER OR MOTHER

QUESTION 10 - Did the decedent have any adopted children, or step-children taken into his home?

ANSWER: YES/NO. If yes, provide their names, ages and addresses below:

NAME	ADDRESS	AGE

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QUESTION 11 - Did the decedent have any unpaid debts? **ANSWER:** YES/NO.
 If yes, provide as nearly as possible the amount of the debt and creditor and whether such debt has since been paid

ANSWER:

CREDITOR	AMOUNT OF DEBT	HAS DEBT NOW BEEN PAID

QUESTION 12 - If the decedent left no children, then give below the names and addresses (together with other information called for), or his or her surviving father, mother, brothers, sisters:

ANSWER:

NAME	RELATIONSHIP	AGE	ADDRESS OR DATE OF DEATH

QUESTION 13 - If the decedent left no children, spouse, mother, father, brother or sister, state all other known relatives:

ANSWER:

NAME	RELATIONSHIP	AGE	ADDRESS

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QUESTION 14: Did the decedent own any real estate in this State:

ANSWER: YES/NO

If yes, list

Address	or	short	description	

County: _____				
Address	or	short	description	

County: _____				
Address	or	short	description	

County: _____				
Address	or	short	description	

County: _____				

QUESTION 15: What is your relationship to the deceased?

ANSWER:

DATED THIS THE _____ DAY OF _____, 20____.

Signature of Affiant

SWORN TO AND SUBSCRIBED before me this the _____ day of _____, 2000.

NOTARY PUBLIC

My Commission Expires: _____