

IN THE CIRCUIT COURT OF THE NINETEENTH JUDICIAL CIRCUIT
LAKE COUNTY, ILLINOIS

ESTATE OF

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Case No. _____

**AFFIDAVIT OF HEIRSHIP
NO SURVIVING SPOUSE/CIVIL UNION PARTNER AND/OR DESCENDANTS**

INSTRUCTIONS: USE THIS FORM IF DECEDENT DIED WITH NO SURVIVING SPOUSE/CIVIL UNION PARTNER AND/OR NO SURVIVING DESCENDANTS (i.e., children, grandchildren, great grandchildren). IF PERSON DIED WITH SURVIVING SPOUSE/CIVIL UNION PARTNER AND/OR DESCENDANTS, USE FORM 171P-26B.

The undersigned, under penalties of perjury as provided by law pursuant to Section 1-109 of the Code of Civil Procedure states:

1. The decedent, _____,
died at _____ on _____ at the age of ____ years.
(Place of Death) (Date of Death)

2. I am a relative of decedent. State relationship: _____
 I am not a relative of decedent, but have knowledge of the decedent's heirship as a result of the following:

3. The decedent was not married or a party to a civil union at the time of death.

4. No child was born to or adopted by decedent in or out of wedlock.

5. The decedent's parents were:

- Father, _____ who survived or predeceased decedent.
- Father is unknown.
- Mother, _____ who survived or predeceased decedent.
- Mother is unknown.

The following children and no others were born to, or adopted by, decedent's parents in or out of wedlock:

Siblings of Decedent	Predeceased Decedent – P Survived Decedent – S	Adopted – A Disabled – D Minor - M
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

Check here if there may be other siblings unknown to the affiant.

If no sibling has predeceased decedent, proceed to paragraph 8.

6. For siblings who predeceased the decedent and who had children born or adopted, please state:

Predeceased Sibling	Name of each child of Deceased sibling (niece/nephew)	Predeceased – P Decedent	Adopted – A Disabled – D Minor – M
		Survived – S Decedent	
1. _____	1. _____	_____	_____
	2. _____	_____	_____
	3. _____	_____	_____
2. _____	1. _____	_____	_____
	2. _____	_____	_____
	3. _____	_____	_____
3. _____	1. _____	_____	_____
	2. _____	_____	_____
	3. _____	_____	_____

7. If any niece or nephew predeceased the decedent, please fill out Exhibit A.

Check here if Exhibit A attached.

If no niece/nephew has predeceased decedent, proceed to paragraph 8.

8. Based on the foregoing, decedent left surviving as decedent's only heirs, the following, all of whom survived decedent, and, in the absence of an indication to the contrary, are of legal age and mentally competent:

Name	Relationship	Disabled – D Minor - M
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____

- Unknown maternal heirs
- Unknown paternal heirs

CERTIFICATION

Under penalties of perjury as provided by law pursuant to Section 1-109 of the Code of Civil Procedure, the undersigned certifies that the statements set forth in this instrument are true and correct.

Date: _____, 20 ____

Affiant _____

Prepared by: _____

Name: _____

Subscribed and sworn to before me this

Attorney's Name: _____

_____ day of _____

Address: _____

City: _____ State: _____

Phone: _____ Zip Code: _____

Notary Public

Fax: _____

ARDC #: _____

**AFFIDAVIT OF HEIRSHIP
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EXHIBIT A**

For nieces/nephews, listed under paragraph 6 who predeceased the decedent and who had children born or adopted, please state:

Deceased Nieces/Nephews	Name of each Child of Deceased Nieces/Nephews	Predeceased - P Decedent Survived – S Decedent	Adopted – A Disabled – D Minor – M
1. _____	1. _____ 2. _____ 3. _____	_____ _____ _____	_____ _____ _____
2. _____	1. _____ 2. _____ 3. _____	_____ _____ _____	_____ _____ _____
3. _____	1. _____ 2. _____ 3. _____	_____ _____ _____	_____ _____ _____

If no child of a deceased niece/nephew has predeceased decedent, proceed to paragraph 8.

For grandnieces/grandnephews listed above who predeceased decedent and who had children born or adopted, please state:

Deceased Grandnieces/Grandnephews	Name of each Child of Deceased Grandnieces/Grandnephews	Decedent Survived – S Decedent	Adopted – A Disabled – D Minor – M
1. _____	1. _____ 2. _____ 3. _____	_____ _____ _____	_____ _____ _____
2. _____	1. _____ 2. _____ 3. _____	_____ _____ _____	_____ _____ _____
3. _____	1. _____ 2. _____ 3. _____	_____ _____ _____	_____ _____ _____

If no child of a deceased Grandniece/Grandnephew has predeceased decedent, proceed to paragraph 8.