

AFFIDAVIT OF HEIRSHIP

State/Commonwealth: _____

Affiant Information:

Full Name: _____

Address: _____

Relationship to Deceased: _____

Deceased Information:

Full Name of Deceased: _____

Last Known Address: _____

Date of Death: _____

Heirs and Family Information:

Heirs at Law and Next of Kin:

Name	Relationship	Address

Statement of Affiant:

I, the Affiant named above, being duly sworn, depose and say: I am the lawful heir and/or the person having knowledge of the family history and affairs of the deceased named above. The Deceased died intestate or without a valid will known to me. To the best of my knowledge, the persons named as Heirs are the only heirs at law and next of kin of the Deceased. There are no other persons entitled to inherit from the Deceased under the laws of intestate succession of the jurisdiction stated above. This Affidavit is made to establish the heirs to the Deceased's estate and for all lawful purposes.

Affirmation and Signature:

I affirm under penalty of perjury under the laws of the State/Commonwealth of _____ that the foregoing statements and information contained in this Affidavit are true and correct to the best of my knowledge, information, and belief.

AFFIANT'S SIGNATURE

NOTARY PUBLIC

Signature: _____

Signature: _____

Printed Name: _____

Printed Name: _____

Date: _____

Date Commission Expires: _____

Seal:

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