

Proof of Death & Heirship

STATE OF _____)
) ss.
COUNTY OF _____)

_____ of lawful age, being first duly sworn states:

That he was well acquainted with _____ and his family, having known them more than _____ years prior to the death of said _____, and has personal knowledge of the facts as stated herein. _____ was the owner of the following described land, situated in _____ County, State of _____ to-wit:

Section _____ Township _____, Range _____

Was this land occupied as the homestead of the deceased? _____ Yes _____ No
Is this land now occupied as homestead of deceased's surviving spouse? _____ Yes _____ No
Are there minor children of the deceased living with the surviving spouse? _____ Yes _____ No
Deceased died on or about the _____ day of _____, _____.
Did deceased leave a will? _____ Yes _____ No
Has estate of deceased been probated? _____ Yes _____ No If so, where? _____
Was deceased married? _____ Yes _____ No
If so, state name of spouse _____
Is spouse living or deceased? _____ If deceased, state date of death _____
(If deceased was married more than once, this fact should be stated, setting out the details below):

If deceased had children, born or adopted, please list below (attach additional page if necessary):

Name	Date of Birth	Date of Death
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

If any of the above are deceased, list heirs (spouse/children) below:

Name	Date of Birth	Date of Death
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

If deceased had no children, born or adopted, list surviving heirs at law, to-wit: (parents and/or siblings)

Name/Relationship	Date of Birth	Date of Death
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Affiant further states that he was well acquainted with the financial condition of said _____ and knows that _____ died solvent, the estate does not owe State of Federal taxes, and all debts against _____ estate were paid in full. And further affiant saith not.

Signed _____
Affiant

Subscribed and sworn to before me this _____ day of _____, _____.

My Commission Expires: _____
Notary Public

SUPPORTING AFFIDAVIT & ACKNOWLEDGMENT

STATE OF _____)
) ss.
COUNTY OF _____)

Before me, the undersigned, a Notary Public, in and for said County and State on the _____ day of _____, _____, personally appeared _____ to me known to be the identical person__ who executed the within and foregoing instrument and acknowledged to me that _____ executed the same as _____ free and voluntary act and deed for the uses and purposes therein set forth.

IN WITNESS WHEREOF, I have hereunto set my official signature and affixed my official seal the day and year first above written.

My Commission Expires:

Notary Public

BENEFICIARY SIGNATURES

Please have all beneficiaries who are listed above execute in the spaces below

WITNESS: _____
BENEFICIARY:
Name: _____
Address: _____
City/State: _____

WITNESS: _____
BENEFICIARY:
Name: _____
Address: _____
City/State: _____

WITNESS: _____
BENEFICIARY:
Name: _____
Address: _____
City/State: _____

WITNESS: _____
BENEFICIARY:
Name: _____
Address: _____
City/State: _____

WITNESS: _____
BENEFICIARY:
Name: _____
Address: _____
City/State: _____