



In case decedent left no surviving spouse and no children or children of deceased children, give the following information:

	NAME	ADDRESS	LIVING	DATE OF DEATH
FATHER	_____	_____	_____	_____
MOTHER	_____	_____	_____	_____

	NAME	ADDRESS OR, IF NOT LIVING, DATE OF DEATH	NAME OF SPOUSE
BROTHERS & SISTERS	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

		CHILD OF
DESCENDENTS OF DECEASED BROTHERS & SISTERS	_____	_____
	_____	_____
	_____	_____
	_____	_____
	_____	_____

Affiant states that he/she was well acquainted with the financial condition of decedent and that the debts against said Estate (have / have not) been paid.

State your relationship or acquaintance with decedent and how long and how well you knew the decedent and the decedent's family: \_\_\_\_\_  
\_\_\_\_\_

Your telephone number: \_\_\_\_\_

Signed: \_\_\_\_\_

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 2019.

My commission expires \_\_\_\_\_

\_\_\_\_\_  
Notary Public

Notary Public resides at: \_\_\_\_\_