Affidavit of Ownership and Heirship

STATE OF _____

County of _____

I, _____, of _____ County, State of _____, who address is _____, am of lawful age, and being duly sworn, according to law, do depose and say that the statements hereinafter set forth, including answers to questions, constitute a true, correct, and complete statement of the family history of the person hereinafter named as "decedents" and of the decedent's estate.

I further state that I was well and personally acquainted with or well and personally acquainted with the family history of _____ the "decedent;" who departed this life on _____ a resident of _____, in the County of _____, State of _____, being _____ years at the time of her death.

A.) *Please provide the following information regarding the decedent's estate:*

Was the decedent married, divorced, single, or a widow/widower at the time of death?

Did the decedent leave a written document purporting to be a Will?

Have any probate proceedings been held on the Estate of decedent or are any planned?

What is the Estate probate case number?

Please include all information, if you need additional room, feel free to use the back of the page or to attach a separate sheet of paper.

B.) *If the decedent was married one or more times, please provide the following information (list names in order of marriage):*

Marriage Order	Name of Spouse	Living or Date of Death	Date/Place of Divorce (if Applicable)	Address (if living) or Residence at Death
1.				
2.				
3.				

C.) *If decedent had any children, please provide the following information:*

Name of Spouse/ Other Parent	Name of Child	Son or Daughter	Living or Date of Death	Address (if living) or Residence at Death
1.				
2.				
3.				

D.) *If decedent had any children by adoption, please provide the following information:*

Spouse with whom Adopted (if applicable)	Name of Child	Son or Daughter	Living or Date of Death	Address (if living) or Residence at Death	Place of Adoption
1.					
2.					
3.					

E.) *The above-named children who predeceased the decedent (See C. & D.) had only the following children (natural or adopted), and other heirs:*

Name of Predeceased Child (from C. & D.)	**Name of Children**	**Relationship to Decedent**	**Living or Date of Death**	**Address (if living) or Residence at Death**

F.) *If decedent left no surviving spouse, no children, and no children of deceased children, please provide the following information:*

	Name	Living or Date of Death	Address (if living) or Residence at Death
Father:			
Mother:			

Brothers & Sisters of Decedent:

	Name	**Living or Date of Death**	**Address (if living) or Residence at Death**
Sibling:			
Sibling:			
Sibling:			

Descendants of Brothers & Sisters of Decedent:

Name of Descendant of Predeceased Brothers & Sisters	**Name of Brother or Sister**	**Living or Date of Death**	**Address (if living) or Residence at Death**

G.) *If the surviving spouse of the decedent had any children who were not the natural or adopted children of the decedent, please provide the following information:*

Name	**Living or Date of Death**	**Address (if living) or Residence at Death**

H.) *Please state the nature of your relationship to or acquaintance with the decedent and/or decedent's family and the length of time of such relationship or acquaintance:*

_____

I.) At the time of death, to the best of the Affiants knowledge and belief, the decedent owned the following real estate/personal property in Ritchie County, West Virginia. (if there are multiple pieces of property or tracts, please list each one individually):

Tract 1: _____

_____

_____

Tract 2: _____

_____

_____

Tract 3: _____

_____

_____

Tract 4: _____

_____

_____

J.) Prior title references: _____

K.) List each heir and the fractional interest that heir now owns:

_____

_____

_____

_____

_____

_____

(additional pages attached)

L.) *Please state any additional comments you may have regarding the family history of the decedent:*

_____

Signed: _____

ACKNOWLEDGMENT & VERIFICATION

STATE OF: _____

COUNTY OF: _____

The foregoing instrument was acknowledged, signed, and sworn to (or affirmed) before me _____

_____, a Notary Public for _____ County by _____

_____ on the _____ day of _____, 2020:

_____

Notary Public

My Commission expires: _____

This document was prepared by: