	NO						
Estate of		of	& & & & & & & & & & & & & & & & & & &	In the County Court of			
Dec	cease	ed	<b>§</b>	Moore County, Texas			
		Sma	II Estate	Affidavit			
_	sona	· · · · · · · · · · · · · · · · · · ·		s of this estate and two disinterested witnesses irm to the accuracy of the following facts, pursuant			
A.	Dec	cedent,		died on the day of			
				County, Texas. A copy of			
	Dec	cedent's death certificate will be filed	d in this cau	ise number at the time this Affidavit is filed.			
B.	Mo	ore than 30 days have elapsed since D	Decedent's o	leath.			
C.	Decedent was a resident of and domiciled in County, Texas, at the time of Decedent's death. [If not Moo're County, the affidavit must include facts supporting venue in Moo're County.]						
D.	Decedent died without a will.						
E.	No administration is pending or has been granted in Decedent's estate and none appears necessary.						
F.	The total value of Decedent's estate assets on the date of this affidavit, not including homestead and exempt property, is \$75,000.00 or less.						
G.		e total value of Decedent's estate assal value of known liabilities.	ets, not incl	uding homestead and exempt property, exceeds the			
H.		Medicaid – check the accurate box:  ☐ The Decedent did not apply for and receive Medicaid benefits on or after March 1, 2005.  ☐ OR					
		Decedent did apply for and receive Estate Recovery Program claim is		benefits on or after March 1, 2005, and the Medicaid iability in section "J" below.			
	<u>OF</u>	<u>R</u>					
		no Medicaid claim against the esta Medicaid Estate Recovery Program	te. [If this l n (MERP) c	taid benefits on or after March 1, 2005, but there is box is checked, applicant(s) <u>must</u> either (1) file a certification that decedent's estate is not subject to mation proving that a MERP claim will not be			

I. All assets of the Decedent's estate and their values are listed here.

**NOTE:** Community property is property acquired during marriage other than by gift or inheritance. Separate property is property owned before marriage or acquired by gift or inheritance during marriage.

Description of Asset(s)  List each asset with enough detail to identify exactly what the asset is. For example, give bank name and last four digits of an account number; give life insurance company name; give description of car plus VIN number; give address & legal description of real property.	\$\$ value of Decedent's interest on date of affidavit For each asset, list the value of Decedent's interest in that asset. An affidavit cannot be approved with an asset of "unknown" value.	Additional information  1. If decedent was married, indicate:  • whether each asset was community or separate property, and  • facts that explain why the asset was community or separate, and  • total value of each community property asset.  2. If decedent was survived by a spouse, minor children, or unmarried adult children who lived with decedent, the list of known estate assets must indicate which assets applicant claims are exempt. See checklist for more information.  Use additional pages as necessary.

(Continue list as necessary. If list is continued on another page, please note.)

including all credit card balances, doctor and hospital bills, utility bills, etc Decedent or Decedent's estate and not paid off.	c. – everything owed by					
If none, write "none."						
If funeral debts or attorney's fees and expenses will be paid from estate ass	sets, list them here.					
Description of Liabilities / Debts: List with enough detail to identify the creditor & any account.	Balance Due					
Continue list as necessary. If list is continued on another page, please note.)						
If you did not list attorney's fees as a liability above but one or more distributee	s have paid or will pay					
attorney's fees for this small estate affidavit, indicate the amount of those fees l	here: \$					
Also indicate who has paid or will pay the fees:						
To The fall of the factor will be David at the factor of the factor of	41 - 14 1 - 4 - 1					
K. The following facts regarding Decedent's family history show who is enti- Decedent's estate, to the extent that the assets of Decedent's estate, exclusion						
exempt property, exceed the liabilities of Decedent's estate. <i>[Put check n]</i>						
small boxes, and provide additional information as indicated.]	•• •					
Family History #1: Marriage.						
On the date of Decedent's death, Decedent was a single person.						
OR						
On the date of Decedent's death, Decedent was married to	#2					
The date they were married:						

All liabilities/debts of the Decedent's estate and their values must be listed here, as of the date the affidavit is signed. The affidavit must list *all* of Decedent's existing debts and other liabilities

Family History #2: Children.							
☐ Decedent had no children by birth or adoption, and Decedent did not take any children into Decedent's home to raise as a child. (Skip to Family History #4 if you check this box.)							
OR							
	The following children were bor	rn to or ado	nted by Decedent. Lis	st all children, whether or no	t I		
	the child is still alive and wheth		•				
	were terminated for any child, g	ive details o	on separate page(s).	-			
	Child's name		Birth date, if known	Name of child's other parent			
					$\neg$		
					$\dashv$		
	(Continue list as necessary. If list is co	ontinued on ar	other page, please note.)				
	or tro	1.2	· · · · · · · · · · · · · · · · · · ·	.41.1	$\neg$		
Fa	mily History #3: Children	, part 2.	Answer II Decede	nt had any children.			
	All of Decedent's children, by b	_			$d \mid$		
	died <u>after</u> the Decedent, contact i	the Court be	fore getting signatures	s on this form.)			
OR							
	The following of Decedent's ch and were survived by children				۱		
	Name of deceased child (followed by	i (or granu			-		
	the name of the deceased child's	Date child	Names of all children of the deceased child (if any of these children died before Decedent, use a separate page to				
	other parent in parentheses)	died	give date of death, plus na	give date of death, plus names & birth dates of all grandchildren)			
	(Continue list as necessary. If list is continued on another page, please note.)						
AN	D/OR						
	The following of Decedent's ch		<b>A</b> 1		ı		
	and were not survived by any	children, g	randchildren, or gre	eat-grandchildren:			
	Name of deceased child		Date	e child died			
					- 1		
11							

If Decedent was survived by any children, grandchildren, or great-grandchildren, you do not need to answer Family History #4 about Parents or Family History #5 about Sisters and Brothers. You may skip to "L" (following #5).

Family I	Family History #4: Parents.						
☐ The D	Decedent was survived	by both pa	arents, _		(mother)		
and _			(fath	ner).			
<u>OR</u>							
□ Deced	dent was survived by o	only one pa	arent,				
Deced	dent's other parent,			, died on			
<u>OR</u>							
□ Both	of Decedent's parents	died befor	e Deced	ent's death.			
	History #5: Sister			• s and brothers is <u>not</u> needed if	Decedent was		
	0 5			s and brothers is <u>not</u> heeded ij dren, or great-grandchildren.	Deceuem was		
☐ The f	following are all of De	cedent's bi	rothers a	nd sisters who were alive on t	he date Decedent		
died,	including half-brother	rs and half-	-sisters v	who were born to <i>either</i> of Dec	edent's parents.		
II	ne, write "none." If an	y of the to	llowing	are now deceased, indicate day	Birth date		
Name	e of brother or sister			State whether full or half-sibling	Dirtii date		
`	nue list as necessary. If lis	t is continued	d on anoth	ner page, please note.)			
AND							
11	<u> </u>			ers (including half-brothers and	d half-sisters who		
II	ne, write "none."	dent's part	enis) ale	d before Decedent's death.			
-			Names o	of all children of deceased brother or			
	e of deceased brother or r (followed by the date of	Full or half	sister (no	ephews and nieces of Decedent) that	Birth dates of nieces		
death	n in parentheses)	sibling?		re on the date Decedent died. If any ore Decedent died, contact the Court.	& nephews		
-							
(Continue list as necessary. If list is continued on another page, please note.)							

## Family History #6: Other.

Fill out a separate page (or pages) if Decedent was survived by none of the following: spouse, child, grandchild, parent, brother, sister, half-brother, half-sister, niece, or nephew. If Decedent was survived by none of the above, list all of the surviving relatives of Decedent on a separate page. Specify Decedent's family history with respect to each of the survivors, giving sufficient detail about names, birth dates, death dates, and relationships to explain how each survivor is related to Decedent.

# **EVERYONE MUST FILL OUT THE FOLLOWING CHART.** Before filling out the chart, see #13 & #15 and pages 6-8 of the Court's Small Estate Affidavit Checklist.

L. Based on the family history given in this Affidavit, the following chart lists all of the Decedent's heirs at law, together with their fractional interests in Decedent's estate:

For each Distributee, list:  1. Name 2. Address 3. Telephone number	Share of separate personal property (this column MUST	Share of separate real property (this column MUST be	Share of decedent's community property (if decedent was married,
4. Email address	be filled out)	filled out, even if you do not list any real property)	you <b>must</b> always fill out this column)

(Continue list as necessary. If list is continued on another page, please note.)

#### Affidavits and signatures of all Distributee(s).

As needed, include other signature pages for additional distributees.

### \*\*\* Every signature page for every distributee must include the box below:

We, as Distributees of the Decedent and as indicated by our signatures below, do solemnly swear or affirm the following:

- the foregoing Affidavit was completed by persons who have actual knowledge of the stated facts;
- all of the facts stated in the foregoing Affidavit are true and complete; and
- each of us has legal capacity.

We pray that this Affidavit be filed in the records of the Moore County Clerk; that the same be approved by the Court; and that the Clerk issue certified copies of this Affidavit and the order approving it as evidence of Distributees' right to inherit the property of Decedent as described above.

We understand that Estates Code §205.007(c) provides that "[e]ach person who execute[s] [this] affidavit is liable for any damage or loss to any person that arises from a payment, delivery, transfer, or issuance made in reliance on the affidavit."

STATE OF		
I am a Distributee in the Estate of swear or affirm that I have personal knowledge of facts contained in the Affidavit are true and complete		, Deceased. I fidavit and that the
Distributee's printed name	Distributee's signature	
SWORN TO AND SUBSCRIBED before me by _ Distributee, on this the day of	,20	[name of Distributee], a
(SEAL)	Notary Public, State of	
STATE OF		
I am a Distributee in the Estate of swear or affirm that I have personal knowledge of facts contained in the Affidavit are true and complete	the facts stated in the foregoing Af	, Deceased. I fidavit and that the
Distributee's printed name	Distributee's signature	
SWORN TO AND SUBSCRIBED before me by day of		[name of Distributee], a
(SEAL)	Notary Public, State of	

# Affidavits and signatures of two disinterested witnesses STATE OF \_\_\_\_\_\_ § COUNTY OF \_\_\_\_\_ § I have no interest in the Estate of \_\_\_\_\_\_\_, Deceased, and am not related to Decedent under the laws of descent and distribution of the State of Texas. I swear or affirm that the facts contained in this Affidavit regarding family history, assets, and liabilities are true and complete to the best of my knowledge. I understand that Estates Code §205.007(c) provides that "[e]ach person who execute[s] [this] affidavit is liable for any damage or loss to any person that arises from a payment, delivery, transfer, or issuance made in reliance on the affidavit." Disinterested Witness's printed name Disinterested Witness's signature SWORN TO AND SUBSCRIBED before me by \_\_\_\_\_ disinterested witness, on this the \_\_\_\_\_ day of \_\_\_\_\_\_, 20\_\_\_\_. Notary Public, State of (SEAL) STATE OF \_\_\_\_\_ § COUNTY OF \_\_\_\_\_ § I have no interest in the Estate of \_\_\_\_\_\_\_, Deceased, and am not related to Decedent under the laws of descent and distribution of the State of Texas. I swear or affirm that the facts contained in this Affidavit regarding family history, assets, and liabilities are true and complete to the best of my knowledge. I understand that Estates Code §205.007(c) provides that "[e]ach person who execute[s] [this] affidavit is liable for any damage or loss to any person that arises from a payment, delivery, transfer, or issuance made in reliance on the affidavit." Disinterested Witness's printed name Disinterested Witness's signature SWORN TO AND SUBSCRIBED before me by \_\_\_\_\_ disinterested witness, on this the \_\_\_\_\_ day of \_\_\_\_\_\_, 20\_\_\_. Notary Public, State of (SEAL) Prepared in the Law Office of:

[Attorney signature block]