

PROOF OF DEATH AND HEIRSHIP

STATE OF _____

COUNTY OF _____

Do not complete this form if either probate or ancillary probate has been conducted in the state where the property is located, or if there has been some other type of court determination in this state. This Affidavit must be recorded in the county in which the property to be transferred is located. If any section requires additional space, please attach a separate sheet of paper. Please send with a certified copy of the death certificate for filing.

I, _____, being of lawful age and duly sworn, state:

1. 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 "decedent" and of the estate of such decedent.
2. Name of decedent: _____
3. Date of death: _____ Where? _____
4. Decedent was the owner of the following described land, situated in Kay County, State of Oklahoma, to wit:

5. Was decedent married or single at time of death? _____ Did decedent leave a will? _____

If a will exists, please attach a complete copy of the will.

Has estate been probated? _____ Where? City _____

County _____ State _____

6. If decedent was married one or more times, give the following information (list names in order of marriage):

☐ Not Applicable

Name of Spouse	Deceased (If yes, Date)	Divorce? (If yes, Date)	Place of Death or Divorce (City, County & State)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

7. If decedent had any children by any spouse, give the following information:

☐ Not Applicable

Name of Child	Address	Age	Son or Daughter	Living or (If deceased Date/Place)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

8. If decedent had any children by adoption, give the following information:

☐ Not Applicable

Name of Child	Address	Age	Son or Daughter	Living or (If deceased Date/Place)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

9. If any of the above-named children have died, please list their heirs, both natural and adopted.

☐ Not Applicable

Name of Child	Name of Heirs	Spouse, Son Or Daughter	Address	Age	Living or (If deceased Date/Place)
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

10. If the decedent left no surviving spouse and no children or children of deceased children, give the following information: ☐ Not Applicable

Relation	Name	Address	Age	Living or (If deceased Date/Place)
Father	_____	_____	_____	_____
Mother	_____	_____	_____	_____
Brother/Sister	_____	_____	_____	_____
Brother/Sister	_____	_____	_____	_____
Brother/Sister	_____	_____	_____	_____

11. Affiant states he or she was well acquainted with financial condition of decedent and knows that decedent died solvent and that all debts against the estate were paid.

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

Further affiant saith not.

Signed _____

Address _____

Telephone _____

Subscribed and sworn to before me this _____ day of _____, 20____.

My Commission Expires: _____

My Commission #: _____

Notary public