Estate of	§ In the
	§
	§ § § of:
	§ § Falls County, Texas _, §
Deceased	_, 2

Small Estate Affidavit

On the dates indicated below, all of the Distributees of this estate and two disinterested witnesses personally appeared and, on their oath, did swear or affirm to the accuracy of the following facts, pursuant to Chapter 205 of the Texas Estates Code:

Α.	Decedent,			, died on the	day of
		. 20	in	County, Texas.	A copy of

Decedent's death certificate will be filed in this cause number at the time this Affidavit is filed.

- B. More than 30 days have elapsed since Decedent's death.
- C. Decedent was a resident of and domiciled in _____ County, Texas, at the time of Decedent's death. [If not in this County, the affidavit must include facts supporting venue in this 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. The total value of Decedent's estate assets, not including homestead and exempt property, exceeds the total value of known liabilities.
- H. Medicaid check the accurate box:
 - □ The Decedent did not apply for and receive Medicaid benefits on or after March 1, 2005.

<u>OR</u>

□ Decedent did apply for and receive Medicaid benefits on or after March 1, 2005, and the Medicaid Estate Recovery Program claim is listed as a liability in section "J" below.

□ The Decedent did apply for and receive Medicaid benefits on or after March 1, 2005, but there is no Medicaid claim against the estate. [If this box is checked, applicant(s) <u>must</u> either (1) file a

Medicaid Estate Recovery Program (MERP) certification that decedent's estate is not subject to a MERP claim or (2) include additional information proving that a MERP claim will not be filed.]

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 <u>facts</u> 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.

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

J. 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 including all credit card balances, doctor and hospital bills, utility bills, etc. – *everything* owed by Decedent or Decedent's estate and not paid off.

If none, write "none."

If funeral debts or attorney's fees and expenses will be paid from estate assets, 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, places note)	

(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 distributees have paid or will pay

attorney's fees for this small estate affidavit, indicate the amount of those fees here: \$_____

Also indicate who has paid or will pay the fees: ____

K. The following facts regarding Decedent's family history show who is entitled to what share of Decedent's estate, to the extent that the assets of Decedent's estate, exclusive of homestead and exempt property, exceed the liabilities of Decedent's estate. *[Put check marks in the appropriate small boxes, and provide additional information as indicated.]*

Family History #1: Marriage.

□ <u>On the date of Decedent's death</u>, Decedent was a single person.

On the date of Decedent's death, Decedent was married to _____. The

date they were married: _____

 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 born to or adopted by Decedent. List <u>all</u> children, whether or not the child is still alive and whether or not parental rights were later terminated. If parental rights were terminated for any child, give details on separate page(s).

 Child's name
 Birth date, if known

 Name of child's other parent

 (Another parent

 (Another

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

Fai	Family History #3: Children, part 2. Answer if Decedent had any children.					
	All of Decedent's children, by birth or adoption, were alive when Decedent died. (If any child died <u>after</u> the Decedent, talk with a lawyer before getting signatures on this form.)					
OR		, ,		g		
	The following of Decedent's ch and were survived by childre				dent's death	
	Name of deceased child (followed by the name of the deceased child's other parent in parentheses)Date child 			edent, use a		
	(Continue list as necessary. If list i	s continued c	on another page, p	lease note.)		
<u>AN</u>	D/OR					
	The following of Decedent's ch and were not survived by any	•				
	Name of deceased child			Date child died		
	Continue list as necessary. If list is co	ontinued on and	other page, please n	ote.)		
	If Decedent was survived					
	you do not need to answe Sisters and E			fents of Family Histor 'L" (following #5).	ory #5 about	
Fai	Family History #4: Parents.					
					(mother)	
	and (father).					
OR						
	Decedent was survived by only	one parent,				
	Decedent's other parent,, died on					
OR						
$\ _{\Pi}$		d before De	cedent's death			
	Both of Decedent's parents died before Decedent's death.					

—							
The	0	Decedent	's sister	s and brothers is <u>not</u> needed if i dren, or great-grandchildren.	Decedent was		
	The following are all of Decedent's brothers and sisters who were alive on the date Decedent died, including half-brothers and half-sisters who were born to <i>either</i> of Decedent's parents. If none, write "none." If any of the following are now deceased, indicate date of death.						
	Name of brother or sister			State whether full or half-sibling	Birth date		
AN	(Continue list as necessary. If list is continued on another page, please note.) AND						
	 The following of Decedent's brothers and sisters (including half-brothers and half-sisters who were born to <i>either</i> of Decedent's parents) died before Decedent's death. If none, write "none." 						
	Name of deceased brother or sister (followed by the date of death in parentheses)	Full or half sibling?	Names of all children of deceased brother or sister (nephews and nieces of Decedent) that were alive on the date Decedent died. If any died before Decedent died, contact the Court.Birth dates of nieces & nephews				
(Co	ntinue list as necessary. If list is co	ontinued on a	another pa	ge, please note.)	1		

Family History #6: Other.

Fill out a separate page (or pages) <u>if</u> Decedent was survived by <u>none</u> 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 L of the Instructions & Forms Using a Small Estate to Probate an Estate in Texas and the Texas Descent and Distribution Chart.

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 4. Email address	Share of separate personal property (this column MUST be filled out)	Share of separate real property (this column MUST be filled out, <i>even if</i> you do not list any real property)	Share of decedent's community property (if decedent was married, you must always fill out this column)

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

M. Affidavits and signatures of <u>all</u> Distributee(s).

As needed, include other signature pages for additional distributees. *** <u>Every</u> signature page for <u>every</u> 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 ______ 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 ________
 §

 COUNTY OF ________
 §

I am a Distributee in the Estate of ______, Deceased. I swear or affirm that I have personal knowledge of the facts stated in the foregoing Affidavit and that the facts contained in the Affidavit are true and complete to the best of my knowledge.

Notary Public, State of _____

N. 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 witness], a disinterested witness, on this the	[name of, 20
(SEAL)	Notary Public, State of
STATE OF § COUNTY OF §	
that the facts contained in this Affidavit regarding facomplete to the best of my knowledge. I understand that Estates Code §205.007(c) paffidavit is liable for any damage or loss to a	provides that "[e]ach person who execute[s] [this] any person that arises from a payment, delivery,
transfer, or issuance mad	le in reliance on the affidavit."
Disinterested Witness's printed name	Disinterested Witness's signature
SWORN TO AND SUBSCRIBED before me by witness], a disinterested witness, on this the	[name of, 20
(SEAL)	Notary Public, State of