NO. Estate of In the *@@@@@@@@@@* **Probate Court** ☐ County Court/County Court at Law of: Falls County, Texas Deceased 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: A. 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 necessarv. 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. OR 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. <u>OR</u> ☐ The Decedent did apply for and receive Medicaid benefits on or after March 1, 2005, but there is

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no Medicaid claim against the estate. [If this box is checked, applicant(s) must 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 • 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.

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

(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, please note.)

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lf yo	u (did not list attorney's fees as a liability abo	ove but one or mor	e distributees have paid or will pay	
attoi	rne	ey's fees for this small estate affidavit, indi	icate the amount o	f those fees here: \$	
Also	ir	ndicate who has paid or will pay the fees: _		•	
K	•	The following facts regarding Decedent's fam Decedent's estate, to the extent that the asse exempt property, exceed the liabilities of Dec small boxes, and provide additional information.	ets of Decedent's es edent's estate. <i>[Pu</i>	tate, exclusive of homestead and at check marks in the appropriate	
F	an	nily History #1: Marriage.			
	l	On the date of Decedent's death, Decedent v	vas a single person.		
<u>o</u>	<u>R</u>				
∥⊏	l	On the date of Decedent's death, Decedent v	vas married to	The	
		date they were married:	_•		
<u> </u>					
F	an	nily History #2: Children.			
	l	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.)			
<u>o</u>	<u>R</u>				
	_	The following children were born to or adopte the child is still alive and whether or not parer were terminated for any child, give details on	ntal rights were late		
		Child's name	Birth date, if known	Name of child's other parent	
		(Continue list as necessary. If list is continued on anoth	 ner page, please note.)	<u> </u>	

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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.)						
<u>OR</u>				,	/		
	The following of Decedent's children, by birth or adoption, died <u>before</u> the Decedent's death and were survived by children (or grandchildren or great-grandchildren):						
	Name of deceased child (followed by the name of the deceased child's other parent in parentheses) Names of all children of the deceased child (if any of these children died before Decedent, use separate page to give date of death, plus names dates of all grandchildren)			dent, use a			
	(Continue list as necessary. If list is	s continued c	n another page, p	lease note.)			
<u>ANI</u>	<u> </u>						
	The following of Decedent's chi and were not survived by any	•	•				
	Name of deceased child			Date child died			
	(Continue list as necessary. If list is continued on another page, please note.)						
	If Decedent was survived you do not need to answer						
				L" (following #5).	ny #5 about		
Far	nily History #4: Parents.						
	The Decedent was survived by	both parent	s,		(mother)		
	and		(father).				
<u>OR</u>							
	Decedent was survived by only	one parent,	·				
	Decedent's other parent,			, died on			
<u>OR</u>	·						
	Both of Decedent's parents died	d before De	cedent's death.				

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The		t Decedent	t's sisters	s and brothers is <u>not</u> needed if 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
 (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 either of Decedent's parents) died before Decedent's death. If none, write "none." 					I half-sisters who
	Name of deceased brother or sister (followed by the date of death in parentheses)	Full or half sibling?	or sister Deceder Deceder	of all children of deceased brother (nephews and nieces of ht) that were alive on the date ht died. If any died before the died, contact the Court.	Birth dates of nieces & nephews
(Con	ntinue list as necessary. If list is co	entinued on a	another na	go places note)	

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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, even if 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.)

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M. 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 Dece affirm the following: the foregoing Affidavit was all of the facts stated in the each of us has legal capac	completed by perso foregoing Affidavit	ons who have actual knowled	•
We pray that this Affidavit be file		the(Fill-in the name of County)	_ County Clerk; that the
same be approved by the Court; approving it as evidence of Distr			
execute[s] [this] affidav	it is liable for any da	5.007(c) provides that "[e]ach amage or loss to any person ance made in reliance on the	that arises from
STATE OF	§		
COUNTY OF	_ §		
I am a Distributee in the Estate of swear or affirm that I have person facts contained in the Affidavit and	nal knowledge of th		
Distributee's printed name		Distributee's signature	
SWORN TO AND SUBSCRIBED Distributee, on this the	D before me by day of	, 20	[name of Distributee], 2
(SEAL)		Notary Public, State of	of
STATE OFCOUNTY OF	§ §		
I am a Distributee in the Estate of swear or affirm that I have perso facts contained in the Affidavit and	nal knowledge of th	•	•
Distributee's printed name		Distributee's signature	
SWORN TO AND SUBSCRIBED Distributee, on this the	D before me by day of	, 20	[name of Distributee], 2
(SEAL)		Notary Public, State o	of

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N. Affidavits and signatures of two disinterested witnesses
STATE OF
I have no interest in the Estate of
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 [name of witness], a disinterested witness, on this the day of, 20
(SEAL) Notary Public, State of
STATE 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 [name of witness], a disinterested witness, on this the day of

(SEAL)

Notary Public, State of _____