

State of West Virginia

County of Fayette, ss:

## Affidabit for Small Estate Intestate

| I,   | , whose address is  | , being first duly   |
|--|---|--|
| sworn, upon oath and under pe                            | nalty of perjury, do depose and say as follows:   |  |
| 1. The decedent,   | , died Intestate on   | , a resident of Fayett   |
| County, in the State of West                             |   |  |
| 2. A certified Death Certifi                             | cate has been furnished herewith for filing in this   | County. I am a Successor of  |
| the Decedent as  | (state relati   | ionship).  |
| 3. The Decedent died intes                               | tate.   |  |
| and distributes in accordance w following persons:  Heir | ecedent died intestate with no known Will. The Dece ith the laws of intestate descent and distribution of the | dent lest as his/her heirs-at-law<br>e State of West Virginia, the |
| Address:   | <del></del>   |  |
| Relationship:  |   |  |
|  | ar item(s):   |  |
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| Heir   | <u> </u>  |  |
| Address:   | ·   |  |
| Relationship:  |   |  |
| Share or percentage or particula                         | r item(s):  |  |
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| Address:   |   |  |
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| share or percentage or particula                         | r item(s):  |  |
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| Share or percentage o   | or particular item(s):  |   |   |  |
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| only of small assets as   | ntire personal probate estate, as of<br>nd the aggregate fair market value<br>t are described and itemized as fol | of the small assets does no   |   |  |
| assets of the Deceden   | t are described and itemized as for   | iows:   |   |  |
|   | <u>Description</u>  | :   |   | <u>Fair Market</u><br>Value  |
|   |   |   |   |  |
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| 7 The Decedent did  | ( )/did NOT ( ) dia sairad a  |   |   | <br>ΓΑL:   |
| real property in the St interest in real estate i                                   | ate of West Virginia. If the Dece in the State of West Virginia, the an the State does not exceed \$100,0         | dent died seized and posses<br>ggregate fair market value   | e real estate or in<br>ssed of any proba<br>of all of the real e                              | terests in probate<br>te real estate or<br>estate interests in                                 |
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| 9. ( ) {Check if applies} of  |                            |                                       |                  |               |
|---|----------------------------|---------------------------------------|------------------|---------------|
| nominated as a personal represe                                       |                            | •                                     |                  |               |
| or if the Decedent died intestate<br>death and no application for the | i i                        |                                       |                  |               |
| been granted in any jurisdiction,                                     | • • •                      | •                                     |                  |               |
| as a personal representative or e                                     | xecutor under the provisi  | ons of the Will of th                 | e Decedent.      |               |
|   |                            |                                       |                  |               |
|   |                            |                                       |                  |               |
|   |                            |                                       |                  |               |
|   | •                          |                                       |                  |               |
| The undersigned Affiant will fait                                     | thfully administer the sma | all assets of the Dece                | edent in accorda | ance with the |
| lary and nov on deliver the same                                      | to the Casesage (a) as an  | الماما                                |                  |               |
| law and pay or deliver the same                                       | to the Successor(s) so en  | ititied.                              |                  |               |
|   |                            |                                       |                  |               |
| <u>.</u>  |                            |                                       |                  |               |
| Date:   |                            |                                       |                  |               |
|   |                            |                                       |                  |               |
| NAME OF SUCCESSOR:  |                            |                                       |                  |               |
| ADDRESS:  | · ·                        | · · · · · · · · · · · · · · · · · · · |                  |               |
|   | <u> </u>                   | <u> </u>                              |                  |               |
|   |                            |                                       |                  |               |
| The foregoing instrument was ack                                      | nowledged before me this   | day of                                |                  |               |
|   |                            | · ·                                   | <del></del>      | <u> </u>      |
| My Commission expires:  | •                          |                                       |                  |               |
|   |                            | Notary                                | / Public         |               |
|   |                            |                                       |                  |               |

SmallEstateAffidavit