PROOF OF DEATH AND HEIRSHIP

THIS AFFIDAVIT MUST BE FILED IN THE COUNTY CLERK'S OFFICE

	eported wner Name			
fro	s affidavit must be completed by m the decedent's estate. Do not obated in court or there has been	complete this form	if the decedent left	a will that was
Aff	idavit of facts concerning the ide	ntity of Heirs for the	e Estate of	
Bet	Fore me, the undersigned authori	ty, on this day perso	onally appeared	
(Af	fiant) who, being first duly sworn	, upon his/her oath	states that:	
1.	My name is My current address is			
	I am personally familiar with	•	rital history of	(deceased) and I
	have personal knowledge of	the facts stated in	this affidavit.	
2.	I knew the decedent from Decedent died on			·
	At the time of decedent's death	decedent's residen	ce was	
	CITY Decedent's place of death	STATE	COUNTY	
	CITY	STATE	COUNTY	
3.	Provide the following information state that below)	on on deceased's ma	arital history (if neve	er married, please
	NAME OF SPOUSE	DATE OF MARRIAGE	DATE OF DIVORCE	DATE OF SPOUSE'S DEATH
4.	Provide the following information there are none, please state that information as an attachment)			•
	NAME OF CHILD	DATE OF BIRTH	NAME OF OTHER PARENT	DATE OF CHILD'S DEATH

5. Provide the following informatio	n on the decease	ed's grandchildren, born only to the
deceased's children in item 4, ab	ove. (if there are	none, please state that below)
NAME OF GRANDCHILD	DATE OF BIRTH	NAME OF GRANDCHILD'S DECEASED PARENT
If the decedent never married ar information on the decedent's p		ny children, provide the following
DECEASED'S PARENTS PARENT'S MOTHER	NAME/CURRENT	ADDRESS IF LIVING DATE OF DEATH
FATHER		
7. Provide the legal description to t Grady County, Oklahoma towit:	the mineral acrea	ge owned by the deceased located in
Further affiant sayeth not.		
Executed this day of		, 20
		Signature of Affiant
STATE OFCOUNTY OF		ACKNOWLEDGEMENT
Before me, on this	day of	, 20
personally appeared	aay or	
known to be the identical person wh	o executed the vecuted the vecuted the same	vithin and foregoing instrument and as his/her free and voluntary act and
acea for the ases and parposes then	c 3ct 101til.	
NOTARY PUBLIC		
MY COMMISSION EXPIRES:		_