STATE OF NORTH CAROLINA COUNTY OF MECKLENBURG

HEIR AFFIDAVIT

I, THE UNDERSIGNED AFFIANT, DO HEREBY SWEAR AND AFFIRM THAT THE FOLLOWING INFORMATION IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE:

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (“decedent”) died on \_\_\_\_\_\_\_\_\_\_\_ without a will.
2. The Decedent’s marital status as the time of death was married \_\_\_\_ unmarried\_\_\_\_.
3. Decedent was survived by \_\_\_\_\_\_ children:
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ married \_\_\_\_ unmarried\_\_\_\_.
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ married \_\_\_\_ unmarried\_\_\_\_.
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ married \_\_\_\_ unmarried\_\_\_\_.
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ married \_\_\_\_ unmarried\_\_\_\_.
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ married \_\_\_\_ unmarried\_\_\_\_.
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ married \_\_\_\_ unmarried\_\_\_\_.

These children were the sole heirs to Decedent’s property at the time of death.
4. Additionally, the following children predeceased Decedent: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Death:\_\_\_\_\_\_\_\_\_\_\_\_\_
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Death:\_\_\_\_\_\_\_\_\_\_\_\_\_
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Death:\_\_\_\_\_\_\_\_\_\_\_\_\_
5. I ATTEST TO THE ACCURACY OF THIS INFORMATION AND FURTHER HEREBY AGREE TO HOLD HARMLESS BARRISTERS TITLE SERVICES AND THEIR AFFILIATES FROM THE INACCURACY OF ANY OF THE INFORMATION HEREIN AND FROM ANY CLAIMS ARISING FROM SAID INACCURACY.

THIS THE*\_\_\_\_\_\_\_\_\_* DAY OF \_\_\_\_\_\_\_\_\_\_\_\_\_, 2018.

\*\*Affiant \*\*Affiant

SWORN TO AND SUBSCRIBED BEFORE ME,

THIS THE*\_\_\_\_\_\_\_\_\_* DAY OF \_\_\_\_\_\_\_\_\_\_\_\_\_, 2018.

 (SEAL)

NOTARY PUBLIC

MY COMMISSION EXPIRES:

\*\*AFFIANT MUST BE SOMEONE WHO DOES NOT STAND TO GAIN FROM THIS TRANSACTION