NO					
Estate of		89 89 89 89 89	In the County Court		
	,	§ §	of		
De	Deceased		Guadalupe County, Texas		
	Sma	all Estate	Affidavit		
-	•		of this estate and two disinterested witnesses rm to the accuracy of the following facts, pursuant		
A.	Decedent,		, died on theday of		
			County, Texas. A copy of		
	Decedent's death certificate will be sub-	mitted to the	e court 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 Guadalupe County, the affidavit must include facts supporting venue in Guadalupe 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 value of the entire assets of the estate of Decedent, not including homestead and exempt property, does not exceed \$75,000.00.				
G.	The value of the entire assets of the estate of Decedent, not including homestead and exempt property, exceeds the known liabilities.				
H.	Medicaid – check the accurate box:				
		l receive Me	edicaid benefits on or after March 1, 2005.		
	OR ☐ Decedent did apply for and receive Estate Recovery Program claim is 1		enefits on or after March 1, 2005, and the Medicaid ability in section "J" below.		
	<u>OR</u>				
	no Medicaid claim against the estate Medicaid Estate Recovery Program	te. [If this b n (MERP) ce	aid benefits on or after March 1, 2005, but there is ox is checked, applicant(s) <u>must</u> either (1) file a certification that decedent's estate is not subject to mation proving that a MERP claim will not be		

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 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	Additional information If exempt property, so indicate. If decedent was married, indicate: 1. whether each asset was community or separate property, and 2. facts that explain why the asset was community or separate 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 are listed here <i>all</i> of Decedent's debts and other liabilities including all credit card balance utility bills, etc. – <i>everything</i> owed by Decedent or Decedent's estate and	ces, doctor and hospital bills
		If none, write "none."	
		If funeral debts or attorney's fees and expenses will be paid from estate as	sets, list them here.
	De	escription of Liabilities / Debts: List with enough detail to identify the creditor & any account.	Balance Due
If	you	e list as necessary. If list is continued on another page, please note.) did not list attorney's fees as a liability above but one or more distributee ey's fees for this small estate affidavit, indicate the amount of those fees h	
\boldsymbol{A}	lso ir	ndicate who has paid or will pay the fees:	
	K.	The following facts regarding Decedent's family history show who is enti- Decedent's estate, to the extent that the assets of Decedent's estate, excluse exempt property, exceed the liabilities of Decedent's estate. [Put check meshall boxes, and provide additional information as indicated.]	sive of homestead and
	Fa	mily History #1: Marriage.	
		On the date of Decedent's death, Decedent was a single person.	
	OR		
		On the date of Decedent's death, Decedent was married to	
		The date they were married:	
	L		

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.)				
<u>OR</u>					
	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	
	(Continue list as necessary. If list is con	ntinued on and	other page, please note.)		
Fa	mily History #3: Children	part 2. A	Answer if Deceder	nt had any children.	
lп	All of Decedent's children, by b	_		-	
OR	•	nun or ud op	were anve when	a Decedent died.	
	The following of Decedent's ch	ildren, by bi	rth or adoption, died	before the Decedent's death	
	and were survived by children	or grand	children or great-gra	andchildren):	
	Name of deceased child (followed by the name of the deceased child's other parent in parentheses)	Date child died		the deceased child If the deceased child the defore Decedent, use a separate page to the solution that the decease	
	(Continue list as necessary. If list is co	l ntinued on an	ther page, please note.)		
AND/OR					
	☐ The following of Decedent's children, by birth or adoption, died <u>before</u> the Decedent's death				
	and were not survived by any children, grandchildren, or great-grandchildren:				
	Name of deceased child		Dat	te child died	
	(Continue list as necessary. If list is co	ntinued on an	other page, please note.)		

If Decedent was survived by any children, grandchildren, or great-grandchildren, you do not need to answer Family History #4 about Parents or Family History #5 about Sisters and Brothers. You may skip to "L" (following #5).

Family History #4: Parents.						
	The Decedent was survive	•	<u>-</u>	(mother)		
	and		(father).			
<u>OR</u>	•					
	Decedent was survived by	only one p	oarent,			
	Decedent's other parent,		, died on	<u> </u>		
OR						
	Both of Decedent's parent	s died befo	ore Decedent's death.			
	Dotti of Decedent o parent	s died sels	To Decedent 8 death.			
Fan	nily History #5: Sister	s and Br	others.			
The	following information abou	t Decedeni	t's sisters and brothers is <u>not</u> needed if L randchildren, or great-grandchildren.	Decedent was		
	died, including half-brother	rs and half-	rothers and sisters who were alive on the sisters who were born to either of Decedollowing are now deceased, indicate date	dent's parents.		
	Name of brother or sister State whether full or half-sibling Birth date					
	(Continue list as necessary. If list	is continued	l on another page, please note.)			
ANI	2					
☐ 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	Full or half	Names of all children of the deceased brother or sister (nephews and nieces of Decedent)	Birth dates of nieces		
	death in parentheses)	sibling?	that were alive on the date Decedent died	& nephews		
(Con	(Continue list as necessary, If list is continued on another page, please note.)					

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 #13 & #15 and pages 4-6 of the Court's Small Estate Affidavit Checklist.

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 (always fill out this column)	Share of separate real property (always fill out this column)	Share of decedent's community property (fill out this column if decedent was married)

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

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

As needed, include other signature pages for additional distributees.

Every signature page for a 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 Guadalupe 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."

	, Deceased. I
the facts stated in the foregoing Af	fidavit and that the
ete to the best of my knowledge.	
Distributee's signature	
	[name of Distributee],a
, 20	
Notary Public. State of	
	, Deceased. I
the facts stated in the foregoing Aff	idavit and that the
ete to the best of my knowledge.	
Distributee's signature	
<u> </u>	
	[name of Distributee], a
, 20	
Notary Public, State of _	
1	Distributee's signature

Affidavits and signatures of two disinterested witnesses				
STATE OFCOUNTY OF	§ §			
	, Deceased, and am not related at and distribution of the State of Texas. I swear or affirm that the rding family history, assets, and liabilities are true and complete to			
affidavit is liable for any dam	§205.007(c) provides that "[e]ach person who execute[s] [this] age or loss to any person that arises from a payment, delivery, issuance made in reliance on the affidavit."			
Disinterested Witness's printed name	Disinterested Witness's signature			
SWORN TO AND SUBSCRIBED be disinterested witness, on this the	efore me by			
(SEAL)	Notary Public, State of			
STATE OF	§ §			
I have no interest in the Estate of to Decedent under the laws of descer facts contained in this Affidavit regarthe best of my knowledge.	, Deceased, and am not related at and distribution of the State of Texas. I swear or affirm that the rding family history, assets, and liabilities are true and complete to			
affidavit is liable for any dam	\$205.007(c) provides that "[e]ach person who execute[s] [this] age or loss to any person that arises from a payment, delivery, issuance made in reliance on the affidavit."			
Disinterested Witness's printed name	Disinterested Witness's signature			
SWORN TO AND SUBSCRIBED be disinterested witness, on this the				
(SEAL)	Notary Public, State of			
Prepared in the Law Office of:				

[Attorney signature block]