

**IN THE CIRCUIT COURT FOR
THE TWENTY-THIRD JUDICIAL CIRCUIT
KENDALL COUNTY, ILLINOIS**

IN THE MATTER OF THE
ESTATE OF

Case No. _____

Deceased

AFFIDAVIT OF HEIRSHIP – NO SURVIVING SPOUSE OR DESCENDANT

_____ on oath says:

1. The Decedent, _____, died at _____
(place of death)
on _____ at the age of _____ years.
(date of death)

2. I am of legal age. I reside at _____,
(street address) (city and state)
I am a _____ of the Decedent.
(state relationship)

I am not related to Decedent, but I have knowledge of the Decedent's heirship as a result of the following:

3. The Decedent was never married.

The decedent was married _____ and (did) (did not) leave a surviving spouse
(once, twice, etc.)
whose name is _____.

The following is the information with respect to each marriage of Decedent:

<u>Name of Spouse</u>	<u>Marriage terminated by death or dissolution (give app. dates)</u>
1. _____	_____
2. _____	_____
3. _____	_____

4. No child was born to or adopted by Decedent.

The following children and no others were born to or adopted by Decedent.

<u>Name of Child</u>	<u>By Spouse Number</u>	<u>Minor or Disabled</u>	<u>Adopted</u>	<u>Predeceased</u>
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____
5. _____	_____	_____	_____	_____

5. The following is the information with respect to each of the above children who predeceased the Decedent:

<u>Name of Deceased Child</u>	<u>Name of each Child of deceased Child (grandchild)</u>	<u>Minor or Disabled</u>	<u>Adopted</u>	<u>Predeceased</u>
1. _____	a. _____			
	b. _____			
2. _____	a. _____			
	b. _____			

If additional space is required, attach an addendum.

If additional generation is required, or other data is required, attach an addendum and refer to it here.

All of the above in the absence of an indication to the contrary, are of legal age, are mentally competent and, if children, are natural children.

Affiant

Attorney for Estate:

Subscribed and Sworn to before me this

Street Address:

_____ day of _____, 20 _____

City and State:

Notary Public

Phone:

NOTE: This form is provided as a convenience and guide. It is not intended to cover all possible heirship situations.