		C	ause No			
Estate of				§ § §	In County Court at Law No	
				\$ \$	Fort Bend County, Texas	
		;	Small Es	state	Affidavit	
-	sona		, did swear		s of this estate and two disinterested witnesses rm to the accuracy of the following facts, pursuant	
A.	De	cedent,			, died on the day of	
			in		County, Texas.	
В.	Mo	ore than 30 days have elapsed si	nce Decede	ent's d	eath.	
C.					County, Texas, at the time of ust include facts supporting venue in Ft. Bend County.]	
D.	De	cedent died without a will.				
E.	No	administration is pending or ha	as been gra	nted ir	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.		e value of the entire assets of the ceeds the known liabilities.	e estate of	Deced	lent, not including homestead and exempt property,	
Н.	OF	<u>R</u>	or and recei		edicaid benefits on or after March 1, 2005.	
	Est OF	tate Recovery Program claim is			enefits on or after March 1, 2005, and the Medicaid ty in section "J" below.	
		The Decedent did apply for an no Medicaid claim against the Medicaid Estate Recovery Pro	e estate. <i>[If</i> ogram (ME	this b	aid benefits on or after March 1, 2005, but there is fox is checked, applicant(s) must either (1) file a ertification 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.

	Additional information
Value	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 If decedent was survived by a spouse, minor children, or unmarried adult children who lived with decedent, the list of known estate assets must indicate which assets applicant claims are exempt. See checklist for more information.
	Use additional pages as necessary.
	Value

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

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If none, write "none." If funeral debts or attorney's fees and expenses will be paid from estate as	ssets, list them here.
Description of Liabilities / Debts: List with enough detail to identify the creditor & any account.	Balance Due
•	
nue list as necessary. If list is continued on another page, please note.)	
The following facts regarding Decedent's family history show who is ent	
Decedent's estate, to the extent that the assets of Decedent's estate, exclu exempt property, exceed the liabilities of Decedent's estate. [Put check n	
small boxes, and provide additional information as indicated.]	narks in the appropriat
1 1 TT	
Family History #1: Marriage.	
On the date of Decedent's death, Decedent was a single person.	
<u>DR</u>	
On the date of Decedent's death, Decedent was married to	·
The date they were married:	

All liabilities/debts of the Decedent's estate and their values are listed here. The affidavit must list

Far	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 both the child is still alive and wheth were terminated for any child, g	er or not pare	ental rights were late		
	Child's name		Birth date, if known	Name of child's other parent	
	(Continue list as necessary. If list is c	ontinued on an	other page, please note.)	
Far	mily History #3: Children	nart 2. A	nswer if Deceder	nt had any children	
	All of Decedent's children, by b	, -		ř	
	An of Decedent's children, by t	niui oi adopi	ion, were anve when	Decedent died.	
OR □	The following of Decedent's ch	ildran by bir	th or adoption diad	hafara tha Dagadant's dagth	
	and were survived by children		-		
	Name of deceased child (followed by the name of the deceased child's other parent in parentheses)	Date child died		the deceased child d before Decedent, use a separate page to mes & birth dates of all grandchildren)	
	(Continue list as necessary. If list is continued on another page, please note.)				
AN	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			child died	
	(Continue list as necessary. If list is continued on another 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.					
		• •			(mother)
	and (father).				
<u>OR</u>					
	Decedent was survived by	only one pa	arent,		·
	Decedent's other parent,			, died on	·
<u>OR</u>					
	Both of Decedent's parents	died befor	e Deced	ent's death.	
	<u> </u>				
	nily History #5: Sister				
				s and brothers is <u>not</u> needed	v
		C		dren, or great-grandchildren	
	9			nd sisters who were alive or who were born to <i>either</i> of Do	
				are now deceased, indicate d	-
	Name of brother or sister			State whether full or half-sibling	Birth date
	(Continue list as necessary. If li	st is continu	ed on ano	ther page, please note)	
ANI				mer page, prease note.	
	_	's brothers	and cict	ers (including half-brothers a	nd half cictors who
				d before Decedent's death.	
	"none."	-	ŕ		
	Name of deceased brother or	Full or half		f all children of the deceased broth (nephews and nieces of Decedent)	Birth dates of nieces
	sister (followed by the date of death in parentheses)	sibling?		e alive on the date Decedent died	& nephews
(Cor	ntinue list as necessary. If list is	continued or	another	nage nlease 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.)

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Affidavits and signatures of all 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 Fort Bend 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."

STATE OF §		
STATE OF		
I am a Distributee in the Estate ofswear or affirm that I have personal knowledge	of the facts stated in the foregoing A	, Deceased. I
facts contained in the Affidavit are true and com		
Distributee's printed name	Distributee's signature	
SWORN TO AND SUBSCRIBED before me b	У	[name of Distributee], a
SWORN TO AND SUBSCRIBED before me by Distributee, on this the day of	, 20	- <u></u> -
(SEAL)	Notary Public, State of _	
STATE OF		
I am a Distributee in the Estate ofswear or affirm that I have personal knowledge	of the feets stated in the ferencing A	, Deceased. I
facts contained in the Affidavit are true and con		amdavit and that the
Distributee's printed name	Distributee's signature	
SWORN TO AND SUBSCRIBED before me b	V	[name of Distributee], 3
SWORN TO AND SUBSCRIBED before me by Distributee, on this the day of	, 20	
(SEAL)	Notary Public, State of _	

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Affidavits and signatures of two disinteres	ted witnesses
STATE OF	
I have no interest in the Estate of to Decedent under the laws of descent and distribution facts contained in this Affidavit regarding family his the best of my knowledge.	
affidavit is liable for any damage or loss to a	ovides that "[e]ach person who execute[s] [this] ny person that arises from a payment, delivery, in reliance on the affidavit."
Disinterested Witness's printed name	Disinterested Witness's signature
SWORN TO AND SUBSCRIBED before me by disinterested witness, on this the day of	[name of witness], a, 20
(SEAL)	Notary Public, State of
STATE OF	
I have no interest in the Estate of to Decedent under the laws of descent and distribution facts contained in this Affidavit regarding family his the best of my knowledge.	on of the State of Texas. I swear or affirm that the
	ovides that "[e]ach person who execute[s] [this] ny person that arises from a payment, delivery, in reliance on the affidavit."
Disinterested Witness's printed name	Disinterested Witness's signature
SWORN TO AND SUBSCRIBED before me by disinterested witness, on this the day of	[name of witness],, 20
(SEAL)	Notary Public, State of

Prepared in the Law Office of: [Attorney signature block]

	CAUSE NO			
ESTATE OF	§ 8	IN COUNTY COURT AT LAW		
	,	NUMBER		
DECEASED	§ §	FORT BEND COUNTY, TEXAS		
ORDER APP	ROVING SMALL	ESTATE AFFIDAVIT		
On this day, the Court co	onsidered the Small	Estate Affidavit ("Affidavit") of the above		
estate and the Court finds that the	e Affidavit complies	with the terms and provisions of the Texas		
Estates Code, that this Court ha	as jurisdiction and	venue, that this estate qualifies under the		
provisions of the Texas Estates C	Code as a Small Esta	ate, and that the Distributees are entitled to		
the personal property of the dece	dent to the extent th	e assets exceed known liabilities, exclusive		
of homestead and exempt propert	y.			
Nothing in this Order	transfers title to	real estate, except as to realty that is		
homestead, nor affects the dis	sposition of proper	rty under a will or other testamentary		
instrument, nor does the Court	t make any determ	ination as to the separate or community		
nature of any property.				
It is ORDERED BY TH	IE COURT that the	Affidavit is APPROVED AS SET OUT		
ABOVE. This Order and the Affidavit shall be recorded in the records of the County Clerk, and				
the Clerk of this Court shall iss	sue certified copies	of the Order and Affidavit to all persons		
entitled thereto.				
SIGNED this day of	of	20		
	-	LIDGE DESIDING		
	J	UDGE PRESIDING		