

STATE OF SOUTH CAROLINA )  
 )  
COUNTY OF \_\_\_\_\_ )  
 )  
IN THE MATTER OF: )  
 )  
\_\_\_\_\_) )  
(Decedent) )

IN THE PROBATE COURT

**AFFIDAVIT OF HEIRS**

CASE NUMBER: \_\_\_\_\_

As the Affiant, I have a duty to disclose all heirs (blood relatives or legally adopted children) of the above Estate and to list those individuals on the Application for Probate (FORM 300ES). Upon the Court's informal review of the Decedent's obituary or other public document, a conflict exists between those name(s) and the name(s) listed on the probate Application. The following names were listed in the obituary or other public document in observance of their close family-type relationship to the Decedent. However, to the best of my knowledge, they are not related by blood or formal, legal adoption to the Decedent: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

As such, I affirm that the above names were listed in the obituary or other public document for the following reason(s):

- Names listed were the Decedent's step-children only
- Names listed were not biological children or formally adopted by the Decedent
- Names listed were foster children who were not adopted
- Names listed were considered special family/friends that were not blood relatives
- Name listed as spouse but the parties were never married neither by a marriage license nor by common law, to the best of my knowledge.
- Other: \_\_\_\_\_  
\_\_\_\_\_

The undersigned, being sworn, states that the facts set forth in the foregoing statement are true to the best of the undersigned's knowledge, information, and belief, and hereby submits to the Court's jurisdiction in this matter.

SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

Affiant Signature: \_\_\_\_\_  
Print Name: \_\_\_\_\_  
Address: \_\_\_\_\_

Notary Public for South Carolina  
My Commission Expires: \_\_\_\_\_

Telephone (Work): \_\_\_\_\_  
(Home): \_\_\_\_\_  
(Cell): \_\_\_\_\_  
E-mail: \_\_\_\_\_