

MISSISSIPPI SMALL ESTATE AFFIDAVIT

I, _____ (Affiant) upon being duly sworn, state up my oath and personal knowledge the following:

- 1. _____, ("Decedent"), SS# _____, died on _____, 20__ in _____ County, Mississippi, at the age of ____ years. A copy of the death certificate is attached hereto as Exhibit "A".
2. The decedent's place of residence immediately before his death was _____ (address), Mississippi, _____ (Zip), which was the place where the principal part of his or her property was situated.
3. The value of the entire estate of the decedent, wherever located, excluding all liens and encumbrances thereon, does not exceed Fifty Thousand Dollars (\$50,000)
4. The decedent died more than thirty (30) days prior to the execution of this Small Estate Affidavit.
5. The decedent left no will and therefore died intestate.
6. No application or petition for the appointment of a personal representative of the decedent is pending, nor has a personal representative of the decedent been appointed in any jurisdiction.
7. There is no known unpaid claimant against the decedent.
8. I am the surviving _____ of the decedent.

I, _____ state under oath that the facts contained in this Affidavit are true and (Printed name of Affiant)

correct as therein stated. I acknowledge and agree LOTSolutions will be discharged and released, to the same extent as if dealing with a personal representative of the decedent, of any further obligations and are under no requirements to see the proper application of the personal property or evidence thereof or to inquire into the truth of any statement in the affidavit. Also, I acknowledge that I shall be answerable and accountable to the personal representative of the estate, if any, or to any other person having superior right.

SWORN TO and SUBSCRIBED BEFORE ME by the above, this ____ day of _____, 20__.

(Signature of Affiant)

Notary Public, State of _____
County of _____

Notary Public

Notary Public Signature

My Commission Expires: _____