

STATE OF MINNESOTA

COUNTY OF _____

JUDICIAL DISTRICT
DISTRICT COURT
PROBATE DIVISION

Court File No. _____

Estate of _____,
Decedent

TESTIMONY OF HEIRSHIP

I _____ state:

1. My address is: _____.
2. My relationship with Decedent is that of: _____.
3. I knew the Decedent for _____ years.
4. (Check appropriate boxes and provide the requested information including name and relationship, if none, so indicate)

To the best of my knowledge, and after a diligent search, the following relatives of the Decedent survived the Decedent by 120 hours:

a. ☐ **Surviving spouse:** whose name is: _____

b. ☐ **Children:** natural or adopted, legitimate or illegitimate (for minors show date of birth): _____

c. ☐ **Descendants of deceased children** (show parentage and date of parent's death): _____

d. ☐ The following persons are:

☐ Descendants of Decedent and Decedent's surviving spouse: _____

☐ Descendants of Decedent only: _____

☐ Descendants of surviving spouse only: _____

Answer e. only if there are no survivors in Items a. through d.

e. ☐ Parents: _____

Answer f. only if there are no survivors in Items a. through e.

f. ☐ Brothers and sisters: _____

Answer g. only if there are no survivors in Items a. through f.

g. ☐ Descendants of deceased brothers and sisters (show parentage and parent's date of death): _____

Answer h. only if there are no survivors in Items a. through g.

h. ☐ Grandparents

1. Maternal Grandparents

☐ grandmother: _____

☐ grandfather: _____

Descendants of decedent's maternal grandparents or either of them if **both** are deceased (Identify relationship of each person): _____

2. Paternal Grandparents

☐ grandmother: _____

☐ grandfather: _____

Descendants of decedent's paternal grandparents or either of them if **both** are deceased (Identify relationship of each person): _____

_____.

Answer i. only if there are no survivors in Items a. through h.

i. ☐ List next of kin. (Note: Identify the relationship of each person to the Decedent, e.g. aunt, uncle, first cousin, and attach a chart showing relationship). _____

_____.

5. Except as stated above, the Decedent left no surviving spouse and no known kindred.

**I declare under penalty of perjury that everything I have stated in this document is true and correct.
MINN. STAT. § 358.116.**

Dated: _____

Affiant

(NOTARIAL STAMP OR SEAL (OR OTHER TITLE OR RANK))

SIGNATURE OF NOTARY PUBLIC OR OTHER OFFICIAL