

**LIST OF HEIRS/REAL ESTATE AFFIDAVIT**  
COMMONWEALTH OF VIRGINIA

Case No. ....

..... Circuit Court

.....  
NAME OF DECEDENT DATE OF DEATH

.....  
NAME AND ADDRESS OF SUBSCRIBER

[ ] I have an interest as ..... in the real property of the decedent; AND/OR

[ ] I qualified in ..... as  
NAME OF COURT

the personal representative of the above-named decedent, who died intestate as to the real estate described herein, and who, at the time of death, was seized of real property in this county/city, briefly described as

.....  
The name and last known address of decedent's heirs are:

**NAMES OF HEIRS ADDRESSES RELATIONSHIP AGE**

.....  
.....  
.....  
.....

.....  
DATE SIGNATURE OF SUBSCRIBER

State/Commonwealth of ..... [ ] City [ ] County of .....

Subscribed and sworn to before me

by .....  
NAME

this ..... day of ....., 20 .....

.....  
[ ] CLERK [ ] DEPUTY CLERK [ ] NOTARY PUBLIC

My commission expires .....

Registration No. ....

VIRGINIA: In the Clerk's Office of the ..... Circuit Court this ..... day of ....., 20 .....  
the foregoing AFFIDAVIT was filed and admitted to record.

Teste: .....  
CLERK

By: ....., Deputy Clerk