

AFFIDAVIT OF NOTICE REGARDING ESTATE OF

(who died on)

I/we, the undersigned, state under oath/affirm the following:

(Check the applicable block)

1. ☐ I/we am/are a personal representative of the estate of the deceased person named above.
☐ I/we am/are a proponent of the will of the deceased person named above.
☐ I/we am/are a person with an interest in the estate of the deceased person named above.
2. ☐ No notice was required to be given to any person pursuant to Va. Code § 64.2-508.

OR

- ☐ I/we mailed or delivered within 30 days of qualification (or probate) a copy of the notice required by Va. Code § 64.2-508 to the following persons shown below:

	<u>NAME</u>	<u>ADDRESS WHERE MAILED OR DELIVERED</u>	<u>DATE MAILED OR DELIVERED</u>
a.			
b.			
c.			
d.			
e.			

(Attach additional pages if more space is needed)

(Check if applicable)

3. ☐ After exercising reasonable diligence, I/we have been unable to determine the address of the following persons to whom such notice is required:

.....

(Check if applicable)

4. ☐ After exercising reasonable diligence, I/we have been unable to identify the names and addresses of the persons described below (such as a child of the deceased person) who may be an heir or beneficiary:

.....

..... DATE	 SIGNATURE
..... DATE	 SIGNATURE

Commonwealth/State of ☐ City ☐ County of

Subscribed and sworn to/affirmed before me on this day of, 20

by
 PRINT NAME(S) OF SIGNATORY

.....

..... DATE	 [] CLERK [] DEPUTY CLERK [] NOTARY PUBLIC
	Notary Registration No. My commission expires:

NOTICE: This affidavit must be recorded in the Clerk's office where the personal representative qualified or the will was probated.

VIRGINIA: In the Clerk's Office of the Circuit Court
 this day of,

The foregoing Affidavit of Notice was this day admitted to record.

Teste: _____, Clerk
 by: _____, Deputy Clerk