IN THE CIRCUIT COURT OF THE ELEVENTH IN AND FOR MIAMI-DADE COUNTY, FLORID		CUIT,			
PROBATE DIVISION	A				
IN RE: ESTATE OF					E 7
deceased.					E-7
C	Case no.:				
	Section:				
	AVIT OF HI			·	
1. My name is:	ted by an intere			I am at least 1	18 years of age and
I live at:					
2. I knew the decedent,				, for	year(s) and have
an interest in the estate of the decedent as follows:					
3. I am personally familiar with the family and ma	rital history of t	he decede	ent and	have persona	al knowledge of the
facts stated in this Affidavit. I have written "unkno	•			•	•
where there are no individuals of a particular class			_		
descendants; and "N/A" for the date of death for a					•
Affidavit(s) of Heirs (E-7S) as needed for any reque	•				
4. Provide the following information on the decede			, 1100 11	om me space	p10 /1000.
			DEC	EEDENT'S	Does the last
NAME AND ADDRESS OF LAST	SPOUSE		MA STA	ARITAL ATUS AT	spouse have any descendants not of the Decedent?
				Married.	☐ Yes
			_	Divorced.	□ No
				Data of Dout	n: .
				Date of Death	1:
5. Provide the following information regarding the any children of the decedent from any previous marr			n and a	adopted child	Iren. This includes
NAME AND ADDRESS OF CHILDREN	YEAR OF BIRTH	DATE DEAT			OF CHILD'S R PARENT

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	_/

If <u>all</u> of the Estate's beneficiaries have been accounted for (i.e., none of the decedent's children have died), you may skip sections 6 - 13, and proceed to the verification on the last page.

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6. Provide the following information regarding the decedent's **grandchildren**, <u>born only to the **deceased** children in section 5 above</u>. If a grandchild has died, also provide the required information regarding the descendant of the deceased grandchild:

NAME AND ADDRESS OF GRANDCHILDREN	YEAR OF BIRTH	DATE OF DEATH	NAME OF DECEASED PARENT

7. <u>If the decedent was not survived by a spouse or any descendants</u>, provide the following information regarding the decedent's **parents**:

	NAME AND ADDRESS OF DECEDENT'S PARENTS	DATE OF DEATH
PARENT #1		
PARENT #2		

8. <u>If the decedent was not survived by a spouse, descendant, or parent, provide the following information regarding the decedent's **brothers and sisters**:</u>

NAME AND ADDRESS OF SIBLINGS	HALF- SIBLING?	YEAR OF BIRTH	DATE OF DEATH
	□ Yes □ No		
	□ Yes □ No		

9. Provide the following information regarding the deceased's **nieces and nephews**, <u>born only to the **deceased** brothers/sisters listed in section 8 above</u>. If a niece/nephew has died, also provide the required information regarding the descendant of the deceased niece/nephew:

NAME AND ADDRESS OF NIECES/NEPHEWS	YEAR OF BIRTH	NAME OF NIECE'S/NEPHEW'S DECEASED PARENT	DATE OF DEATH

following information for the decedent's grandparents :					
	NAME AND ADDRESS OF GRANDPARENTS	DATE OF DEATH			
PARENT #1					
PARENT #1					
PARENT #2					
PARENT #2					

10. If the decedent was not survived by a spouse, a descendant, a parent, a sibling, or niece/nephew, provide the

11. Provide the following information regarding the decedent's **aunts and uncles**, born only to the deceased grandparents listed in section 10 above:

NAME AND ADDRESS OF AUNTS/UNCLES	DATE OF DEATH	NAME OF AUNT/UNCLE'S DECEASED PARENT

12. Provide the following information regarding the decedent's **cousins**, <u>born only to the **deceased** aunts and uncles listed in section 10 above</u>. If a cousin has died, indicate as such, and provide the required information regarding the descendant of the deceased cousin:

NAME AND ADDRESS OF COUSINS	YEAR OF BIRTH	DATE OF DEATH	NAME OF COUSIN'S DECEASED PARENT

13. If the decedent was not survived by any members of the classes listed in sections 5 through 12, but was predeceased by a spouse, provide the following information regarding the kindred of the decedent's last spouse (starting with the spouse's children). If a descendant has died, indicate as such, and provide the required information regarding the descendant of the deceased person:

KINDRED OF DECE	EASED SPOUSE or ADI	DITIONAL SI	PACE FOR ANY	PREVIOUS SECTION
NAME AND ADDRESS	S OF DESCENDANTS	YEAR OF BIRTH	DATE OF DEATH	NAME OF DESCENDANT'S PARENT
☐ Check here if you are	attaching form F 75 s	os a supplem	ent to this affid	avit
· ·	<u>-</u>			avn. Affidavit of Heirs and the
facts stated therein are		nave read ti	ne foregoing A	indavit of ficins and the
Signature of Affiant			Date	
D' A IN CACC				
Printed Name of Affiant				
Address				
City	State	Zip		
Telephone Number		Email A	Address	
FURTHER AFFIANT SAY	ETH NAUGHT.			
State of City of				
County of				
Sworn to (or affirmed) and s	subscribed before me, by	means of \square p	hysical presence	or □ online notarization, this
day of, 20), by		, w	ho is personally known to me
and/or produced		as identifica	tion.	
My Commission Expires:				
[SEAL]				
[SLIL]				Notary Public