## AFFIDAVIT FOR COLLECTION OF ALL PERSONAL PROPERTY

By signing this affidavit, I swear or affirm under penalty of perjury that its contents are true and correct.

| 1. | INFORMATION ABOUT THE DECEASED (THE PERSON WHO DIED).  |  |  |  |  |
|----|--|--|--|--|--|
|    | Nam  | e of person who died:  |  |  |  |
|    | Date   | of death:  |  |  |  |
|    | Place  | e of death:  |  |  |  |
|    |  | (County, State)  |  |  |  |
| 2. | 30 D   | AY REQUIREMENT. More than thirty (30) days have gone by since the person died.   |  |  |  |
| 3. | REL  | ATIONSHIP. My relationship to the person who died is:  |  |  |  |
| 4. |  | <b>UE OF PERSONAL PROPERTY.</b> The value of all the personal property in the deceased person's e, wherever located, minus the amount of liens and encumbrances on the property, is not greater than 000.  |  |  |  |
| 5. | Petiti<br>state  | <b>SONAL REPRESENTATIVE.</b> To the best of my knowledge, no one has filed an Application or on for Appointment of a Personal Representative and no Application or Petition has been granted in any; <b>OR</b> if an application has been granted the personal representative has been discharged; <b>OR</b> more than year has elapsed since a closing statement has been filed and the amount does not exceed \$75,000.  |  |  |  |
| 6. | <b>ENTITLEMENT.</b> I am the claiming successor to the personal property and I am entitled to payment or delivery of the property because: (Check all boxes that apply.) |  |  |  |  |
|    |  | I am named in the Will of the person who died, a copy of which is attached to this Affidavit.  |  |  |  |
|    |  | <ul> <li>The deceased had no Will, but I am entitled to the property under law because (check ONE)</li> <li>I am the spouse of the person who died;</li> <li>I am a child of the person who died, and there is no surviving spouse, or there is a surviving spouse but he or she is not my parent and the deceased had separate or community property;</li> <li>I am the parent of the person who died, and there is no surviving spouse or child;</li> <li>I am a brother or sister of the person who died, and there is no surviving spouse, child or parent;</li> <li>The person died without a Will and I am the sole heir.</li> </ul> |  |  |  |
|    |  | The person died without a Will and the people with equal or greater right than I have to the property, who are listed above, have all assigned their entire interests in the estate to me, which is proven by the copy of the documents they signed to this effect that I am attaching to this affidavit.  |  |  |  |
|    |  | The person died and left a valid Will and the people with equal or greater right than I have to the property, who are listed above, have all assigned their entire interests in the estate to me, which is proven by the copy of the documents they signed to this effect that I am attaching to this affidavit.   |  |  |  |

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|                           | Description   | Value  | Location, or Who Has Property Now                               |  |  |
|---------------------------|---|--|---|--|--|
|                           |   | \$   |   |  |  |
|                           |   | \$   |   |  |  |
|                           |   | \$   |   |  |  |
|                           |   | \$   |   |  |  |
|                           |   | <b></b> \$   |   |  |  |
|                           | TOTAL VALUE: \$   |  |   |  |  |
| 8.                        | <b>MONEY OWED.</b> The person who died was entitled to collect on the following debts from persons located in Arizona: (List all. Attach extra pages if necessary.)   |  |   |  |  |
|                           | Description   | Amount owed  | Name of Who Owes the Debt                                       |  |  |
|                           |   | \$   |   |  |  |
|                           |   | <b></b> \$   |   |  |  |
|                           |   | \$   |   |  |  |
|                           |   | <b></b> \$   |   |  |  |
|                           | TOTAL AMOUNT OWED:  | <b>5</b>   |   |  |  |
| 9.                        | FUNERAL EXPENSES. Fu  | ineral expenses, expenses of las   | st illness, and all unsecured debts of the                      |  |  |
|                           | person who died have been   | • • • •  |   |  |  |
|                           | person who died have been This affidavit is made under  | paid   | ona Revised Statutes, for the purpose of                        |  |  |
| 10.                       | person who died have been This affidavit is made under  | paid Arizona Law, §14-3971(B), Arizo   |   |  |  |
| 10.<br>OAT<br>STA1        | person who died have been<br>This affidavit is made under<br>making claim to personal pro   | paid Arizona Law, §14-3971(B), Arizo   |   |  |  |
| 10.<br>OAT<br>STAT<br>MOH | person who died have been This affidavit is made under making claim to personal pro TH OR AFFIRMATION TE OF ARIZONA ) AVE COUNTY ) ss.  | paid Arizona Law, §14-3971(B), Arizo   | ona Revised Statutes, for the purpose of                        |  |  |
| 10.  OAT  STAT  MOH       | person who died have been This affidavit is made under making claim to personal pro TH OR AFFIRMATION TE OF ARIZONA ) AVE COUNTY ) ss. contents of this document ar   | paid Arizona Law, §14-3971(B), Arizo   | ona Revised Statutes, for the purpose of                        |  |  |
| 10.  OAT STAT MOH. The c  | person who died have been This affidavit is made under making claim to personal pro TH OR AFFIRMATION TE OF ARIZONA ) AVE COUNTY ) ss. contents of this document ar ature:  (Person Make)                         | paid Arizona Law, §14-3971(B), Arizonerty of the person who died.  e true and correct under penal ing Affidavit) | ona Revised Statutes, for the purpose of                        |  |  |
| OAT STAT MOH Signa        | person who died have been This affidavit is made under making claim to personal pro TH OR AFFIRMATION TE OF ARIZONA ) AVE COUNTY ) ss.  contents of this document ar ature:  (Person Make SCRIBED AND SWORN TO be | paid Arizona Law, §14-3971(B), Arizonerty of the person who died.  e true and correct under penal ing Affidavit) | ona Revised Statutes, for the purpose of ety of perjury.  Date: |  |  |
| OAT STAT MOH Signa        | person who died have been This affidavit is made under making claim to personal pro TH OR AFFIRMATION TE OF ARIZONA ) AVE COUNTY ) ss. contents of this document ar ature:  (Person Make)                         | paid Arizona Law, §14-3971(B), Arizonerty of the person who died.  e true and correct under penal ing Affidavit) | ona Revised Statutes, for the purpose of ety of perjury.  Date: |  |  |

Revised: 11/2019