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AFFIDAVIT C	F HEIRSHIP OF
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				Decedent's	Name		Valero's Owner #
STAT	E OF	}					
COUN	NTY OF	¯'SS. }					
		-3					
with th	he above named decedent during		-			-	at affiant was personally and well acquainted
Dece	dent died at			County S	State of		on or about theday of
							at the time of death.
That t	he following statements and answ	wers to the followir	ng questions are b	based upon the	e personal knowledg	e of affiant and are	true and correct:
1.	Did decedent leave a will? proceedings are pending, and r				probate	; Give	name of County and State in which such
	(If decedent left a will, please	attach a certified	d copy of same, t	ogether with	a copy of the orde	r of court admittir	g it to probate, and letters testamentary.)
2.							county and state in which said administration
3.	Have ancillary probate proceed	•			nere?		
4.	If no administration proceeding	s have been starte	ed, are there any p	plans to have th	ne estate administe	red?	
5.		-					If so, give as nearly as
6.	Was decedent surety on any bo amount, etc.	ond or guarantor o	f any other persor	n's indebtedne:	ss at time of death?		_ If so, give details as to principal debtor,
7.	Were there any suits pending o and parties		U U			If so	, state briefly the nature, amount involved
8.	Marital Status of Decedent at T	ïme of Death (mar	ried, single, divor	ced, widow, wi	dower)		
9.	If decedent was ever married, o	rive the following in	nformation for eac	ch marriage: (l	ist names in order c	f marriage)	
0.	Name of Spouse	give the following it	Date of	Living/Dead		Date of Death	Was there a property settlement?
	Name of Opouse		Marriage	Living/Deat	Divolced	or Divorce	lf "Yes" – attach copy.
				1			
10.	If decedent had any children by	any spouse, or ac	dopted any childre	en, give the foll	owing information:		
	Name of Child	Date of Birth	Living/Dead	Date of Death	Social Security Number		Address & By Which Spouse

11. If a deceased child left descendants, give the following information:

Name of Deceased Child	(Deceased Child's Children) Name Of Child	Date Of Birth	Date of Death	Living/Dead	Address

AFFIDAVIT OF HEIRSHIP OF

Decedent's Name

Valero's Owner #

12. If decedent left no children or descendant of deceased children, then please furnish the following information:

a. Give name of parents of decedent:

Name	Living/Dead	Date of Death	Address
Father:			
Mother:			

b. Give names of brothers and sisters of decedent:

Name	Relation	Living/Dead	Date of Death	Address

c. Give names of children of deceased brother or sister:

Child of	Name of Child	Date of Birth	Living/Dead	Address

13. If decedent left no heirs covered by item 12 above, then attach a full and complete affidavit of heirship of said decedent in narrative form.

14. Give location or description of homestead of decedent, as of date of death:

15. As to each tract of land or interest in land owned by the decedent at the time of his death which concerns this company, give the following information which will be used primarily for the purpose of determining whether property was separate or community: (If space provided is insufficient, attach exhibit giving same information as to each tract).

Description	Date Acquired	From Whom?	State How Acquired (Gift, Purchase, Inheritance or Under a Will)	If acquired by Purchase, were funds used those of decedent only or community property funds with spouse?

16. Here briefly state facts and circumstances (such as being a relative, a close friend, or attorney or agent for, decedent) which will show basis and source of information given above.

	Affiant
	Address
	Phone #
Subscribed and sworn to before me thisday of	, 20
My commission expires:	Notary Public
SUPPORTING AF	FIDAVIT
STATE OF} SS.	
SS. COUNTY OF}	
, of lawf	ul age, being first duly sworn, on oath states:
That was personally and well acquainted with	duringlifetime:
thathas read the above affidavit by	and that the facts stated therein are
true and correct.	
	Affiant
Subscribed and sworn to before me thisday of	., 20
Management and a second se	
My commission expires:	Notary Public