

STATE OF ILLINOIS

COUNTY OF _____



20070808000371230 1/2 \$17.00
Shelby Cnty Judge of Probate, AL
08/08/2007 01:51:25PM FILED/CERT

SMALL ESTATE AFFIDAVIT

I, Beverly Harris, on oath state:
(Name of Affiant)

1. (a) My post office address is _____
(b) My residence address is 3300 Hanlin Rd Lizella, Ga 31052; AND
(c) I understand that, if I am an out-of-state resident, I submit myself to the jurisdiction of Illinois courts for all matters related to the preparation and use of this affidavit. My agent for service process in Illinois is:

Name _____ City _____
Address _____ Telephone (if any) _____

I understand that if no person is named above as my agent for service or, if for any reason, service on the named person cannot be effectuated, the Clerk of the Circuit Court of _____ (county) _____ (Judicial Circuit) Illinois, is recognized by Illinois law as my agent for service of process.

2. The decedent's name is Joseph M. Gudziczak
3. The date of the decedent's death was 5-14-89, and I have attached a copy of the death certificate hereto.
4. The decedent's place of residence immediately before his death was Wilcoxville, GA.

5. No Letters of Office are now outstanding on the decedent's estate and no petition for letters is contemplated or pending in Illinois or in any other jurisdiction, to my knowledge.

6. The gross value of the decedent's entire personal estate, including the value of all property passing to any party either by intestacy or under a will, does not exceed \$100,000.00 and consists of the following: (Here, list each asset, e.g., cash, stock, and its fair market value).

7. Please mark (X) the correct box.

- (a) ☒ All of the decedent's funeral expenses have been paid; OR
(b) ☐ The amount of the decedent's unpaid funeral expenses and the names and post office address of each person entitled hereto are as follows:

Name	Post Office Address	Amount
_____	_____	_____

8. There is no known unpaid claimant or contested claim against the decedent, except as stated in paragraph 7.

9. (a) The names and places of residence of any surviving spouse, minor children and adult dependent* children of the decedent are as follows:

Name and Relationship	Place of Residence	Age of Minor Child
_____	_____	_____
_____	_____	_____
_____	_____	_____

* Note: An adult dependent child is one who is unable to maintain himself and is likely to become a public charge.

- (b) The award allowable to the surviving spouse of a decedent who was an Illinois resident is \$_____ (\$10,000, plus \$5,000 multiplied by the number of minor children and adult dependent children who resided with the surviving spouse at the time of the decedent's death. If any such child did not reside with the surviving spouse at the time of the decedent's death, so indicate in 9a).

(OVER)

- (c) If there is no surviving spouse, the award allowable to the minor children and adult dependent children of a decedent who was an Illinois resident is \$_____ (\$10,000, plus \$5,000 multiplied by the number of minor children and adult dependent children), to be divided among them in equal shares.

10. Indicate either 10a or 10b by marking (X) the correct box.

- (a) ☒ The Decedent left no will. The names, places of residence and relationships of the decedent's heirs, and the portion of the estate to which each heir is entitled under the law where decedent died intestate are as follows:

<u>Name, Relationship and Place of Residence</u>	<u>Age of Minor</u>	<u>Portion of Estate</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

- (b) ☐ The decedent left a will, which has been filed with the clerk of an appropriate court. A certified copy of the will on file is attached. To the best of my knowledge and belief the will on file is the decedent's last will and was signed by the decedent and the attesting witnesses as required by law and would be admissible to probate. The names and places of residence of the legatees and the portion of the estate, if any, to which each legatee is entitled are as follows:

<u>Name, Relationship and Place of Residence</u>	<u>Age of Minor</u>	<u>Portion of Estate</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

- (c) Affiant is unaware of any dispute or potential conflict as to the heirship or will of the decedent.

11. The property described in paragraph 6 of this affidavit should be distributed as follows:

<u>Name</u>	<u>Specific Sum or Property to be Distributed</u>
_____	_____
_____	_____

By signing this sworn affidavit, Affiant acknowledges that upon payment, delivery, transfer, access or issuance pursuant to a properly executed affidavit, the Illinois State Treasurer's Division of Unclaimed Property is released to the same extent as if the payment, delivery, transfer, access or issuance had been made or granted to the representative of the estate. Affiant further acknowledges that that he/she is answerable to any person having a prior right and is accountable to any representative of the estate. The Affiant signing this small estate affidavit shall indemnify and hold harmless all creditors and heirs of the decedent and other persons relying upon the affidavit who incur loss because of such reliance. That indemnification shall only be up to the amount lost because of the act or omission of the Affiant.

The foregoing statement is made under the penalties of perjury. (Note: A fraudulent statement made under the penalties of perjury is perjury, as defined in 720 ILCS 5/32-2 which states that a person commits perjury when, under oath or affirmation, in a proceeding or in any other matter where by law such oath or affirmation is required, he makes a false statement, material to the issue or point in question, which he does not believe to be true.)

Beverly Harris 8-6-07
Signature of Affiant Date

478 655-1150
Daytime Telephone Number

Signed and sworn to by Beverly Harris before me this 6th day of August, 2007

James G. Hill
Notary Public

My Commission expires July 31, 2011



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