## AFFIDAVIT OF FACTS CONCERNING THE IDENTITY OF HEIRS

	Before me, the undersigned authority, on this day personally appeared  On the undersigned authority, on this day personally appeared  On the undersigned authority, on this day personally appeared  On the undersigned authority, on this day personally appeared  On the undersigned authority, on this day personally appeared  On the undersigned authority, on this day personally appeared  On the undersigned authority, on this day personally appeared
1.	My name is Note W. Cunning M., and I live at (insert address of affiant's residence). I am personally familiar with the family and marital history of James A. Wolfe ("Decedent"), and I have personal knowledge of the facts stated in this affidavit.
2.	I knew decedent from 2005 (insert date) until 5/10/20 (insert date).  Decedent died on or about 5/10/20 (insert date). Decedent's place of death was 5/20/20/20/20/20/20/20/20/20/20/20/20/20/
3.	Decedent's marital history was as follows:  Marcied, Renee C. Woke
	(insert marital history and, if decedent's spouse is deceased, insert date and place of spouse's death).
4.	Decedent had the following children:  - Ophise Holfe Godffee  - Tower Brack, Males - Hoceanse
	(insert name, birth date, condition in life of child as mental and/or physical incapacity, name of other parent, and current address of child or date of death of child and descendants of deceased child, as applicable, for each child, or state "none").
5.	Decedent did not have or adopt any other children and did not take any other children into decedent's home or raise any other children, except:
	(insert name of child or names of children, or state "none").
6.	(Include if decedent was not survived by descendants.) Decedent's mother was:
	(insert name, birth date, and current address or date of death of mother, as applicable).
7.	(Include if decedent was not survived by descendants.) Decedent's father was:
	(insert name, birth date, and current address or date of death of father, as applicable).
8.	(Include if decedent was not survived by descendants or by both mother and father.) Decedent had the following siblings:
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(insert name, birth date, and current address or date of death of each sibling and parents of each sibling and descendants of each deceased sibling, as applicable, or state "none"). 9. Decedent died without leaving a written will. 10. There has been no administration of decedent's estate. 11. To the best of my knowledge, decedent left no debts that are unpaid, except: (insert list of debts, or state "none"). 12. To the best of my knowledge, there are no unpaid estate or inheritance taxes, except: (insert list of unpaid taxes, or state "none"). 13. To the best of my knowledge, decedent owned an interest in the following real property: Milhas Arecent (insert list of real property in which decedent owned an interest, or state "none"). 14. The following were the heirs of decedent: (signature of affiant) State of Alabana County of Julian County Sworn to and subscribed to before me on 7/11/22 (date) by (affiant). (signature of notarial officer) THE OF A MENTINE (printed name)

My commission expires:

## Exhibit "A" Property Description

Lot 21, according to the Survey of First Amended Plat of Greystone Farms, Milner's Crescent Sector - Phase 1, as recorded in Map Book 19, Page 140 in the Office of the Judge of Probate of Shelby County, Alabama; being situated in Shelby County, Alabama.

TOGETHER WITH the nonexclusive easement to use the private roadways, Common Areas and Hugh Daniel Drive, all as more particularly described in the Greystone Farms Declaration of Covenants, Conditions and Restrictions recorded as Instrument #1995-16401 in the Probate Office of Shelby County, Alabama, as amended from time to time (which, together with all amendments thereto, is hereinafter collectively referred to as the "Declaration").



Filed and Recorded
Official Public Records
Judge of Probate, Shelby County Alabama, County
Clerk
Shelby County, AL
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