



ARKANSAS UNCLAIMED PROPERTY

AFFIDAVIT OF DUAL HEIRSHIP

An affidavit of dual heirship ("Affidavit") can be used to establish the heirs of two deceased persons ("Decedents") where: (1) the two Decedents were married at the time of death, (2) the two Decedents have no natural or adopted children outside of their marriage, (3) the Claimant is a direct heir of both Decedents, and (4) there is **no probated will or estate** for either Decedent. Probate is the process of proving the will, which usually entails filing the will with the county courthouse. The Affidavit should only be used in the absence of a probated will or estate. You may attach additional pages for any section below if more space is required. You will be required to provide copies of death certificates for any deceased individual(s).

The claimant understands that filing a false affidavit constitutes a felony in this state and may result in criminal action as well as legal proceedings to recover any proceeds paid pursuant to a false affidavit in addition to related damages.

UNDER OATH, I ANSWER THE FOLLOWING QUESTIONS:

Section 1. Please complete all the following fields:

Claimant's Name	Claimant's Address	Claim ID#
First Decedent's Name	Date of Death	Relationship to Decedents
Second Decedent's Name	Date of Death	

Section 2. Did either of the Decedents leave a probated will or estate? If either Decedent left a probated will, a copy must be included with your Claim. **Do not proceed with the Affidavit of Dual Heirship if there is a probated will or estate.**

☐ Yes

☐ No

Section 3. Were the Decedents legally married at the time of death?

☐ Yes

☐ No

Section 4. Did the Decedent have children (living or deceased, natural or adopted)?

☐ Yes

☐ No

Section 4a. If the answer to Section 4 (above) was **YES** list the names of ALL Decedents' children and their spouses* (including yours if applicable); if deceased, provide date of death:

Name of Decedents' Child(ren)	Date of Death (if applicable)	Child(ren)'s Spouse	Date of Death (if applicable)

* if more space is needed, you may attach additional pages to your claim.

☐ Check this box only if an additional page is attached.

Section 4b. *Only complete Section 4b if there are deceased children of the Decedents listed in Section 4a (above).* List his/her name, as stated in Section 4a, in the first column below. In the second column, list the names of the deceased child's child(ren) (living or deceased; natural or adopted). If the deceased child had no children, write NONE under "Name of Deceased Child's Child(ren)." If any of the deceased child's children are also deceased, provide the date of death for that individual in the third column and provide the names of his/her child(ren) (living or deceased; natural or adopted) on an attached page*.

Name of Deceased Child from Section 5	Name of Deceased Child's Children	Date of Death

* if more space is needed, you may attach additional pages to your claim.

☐ Check this box only if an additional page is attached.

(Complete **Declaration** on Page 3 in front of Notary)

Section 5. DECLARATION:

I declare under penalty of perjury under the law of the State of Arkansas that the foregoing is true, correct, and complete to the best of my knowledge and belief.

Claimant Name (print)	Signature	Date
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NOTARY SECTION

STATE OF _____ COUNTY OF _____

SUBSCRIBED AND SWORN TO before the undersigned Notary Public on this _____ **day** of _____,
20_____.

Notary Signature _____ Notary Name (print) _____

My Commission Expires _____

[Notary Seal]