## IN THE CHANCERY COURT OF COFFEE COUNTY, TENNESSEE

IN THE MATTER OF THE E	STATE OF		
	,	NO	
DECEASED.	,	) ) )	
<u>A</u> 1	FFIDAVIT UNDER 1	THE SMALL ESTATE	ES ACT
(county), State of Decedent's last resid () Decedent lef	 ence was t no will.		
The decedent left the	following unpaid de	bts at his/her death:	
Creditor	Address		Amount
(if other debts, attach separa	ate sheets)		
Decedent diec possession):	d owning the followin	g property (list all pe	rsonal property and who now has
Item	Location & Po	ssession	Value

(If other items, attach sepa Sub-Total	rate sheet.)		
Total from Attached Sheets	3		
Total		_	
	ng the following real estate (list st rty. If vacant, state acreage):	reet address and	I state whether there are
Description		Value	
		_	
		- - —	
Decedent owned the Insurance Company	e following insurance policies <b>pay</b> Policy Number		nt's estate. ace Value
The following are the under a will. Name	e names and addresses of all Ded Address		
Name ————————————————————————————————————	Address	Age - ———	Relationship
	<u> </u>		
	<del></del>		

I am willing to collect and preserve all assets of the estate, pay all creditors and distribute the remainder according to the terms of the Will or according the laws of descent and distribution of the State of Tennessee and will file a tax return and pay tax on Decedent's property.

UNDER PENALTY OF PERJURY, I DECLARE THE FACTS STATED IN THIS AFFIDAVIT ARE NOT FALSE OR MISLEADING AND ARE TRUE, CORRECT, AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF AND THAT I AM MINDFUL OF MY DUTIES AS IMPOSED UPON ME BY TITLE 30 CHAPTER 4 OF THE TENNESSEE CODE ANNOTATED

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	AFFIANT
	(ADDRESS)
	(PHONE)
STATE OF TENNESSEE COUNTY OF COFFEE	
Personally appeared before me, of Tennessee, the saidthe facts in the above Affidavit are true to	Clerk and Master, Chancery Court of Coffee County,, and after being sworn deposes and says, that to the best of his/her knowledge, information and belief.
	Affiant
Sworn to and subscribed before me this	s the day of,
	CHARLOTTE V. BROYLES CLERK AND MASTER
	By:
	By: Deputy Clerk