

INHERITANCE QUESTIONNAIRE AND AFFIDAVIT

I, _____ being first duly sworn say: _____
(Name of person completing form) (Name of Deceased)

was enrolled to the Evansville, Incorporated Native Corporation:

INFORMATION OF DECEASED

1. Date of Birth: _____ Date of Death: _____ Place of Death _____ **Include copy of Death Certificate**

2. Where did deceased live? _____ Years at Residence _____
(Mailing Address)

3. Maiden/former names used: _____

MARITAL STATUS Please check all that apply

- 4. The deceased had never been married.
- The deceased was married to: _____ at the time of death.
- The deceased had previously been married to: _____
Date of Divorce _____ or Date of Death _____

CHILDREN Please check one

- 5. The deceased had no children.
- The deceased had the following children (living and deceased).

If deceased, provide date of death. If child was survived by children list those children in the "Grandchildren" section.

X Please check if adopted **IN** to the family. If adopted **OUT** of family see Question 9.

	<u>Child's Name</u>	<u>Mailing Address (or date of death, if deceased)</u>	<u>Phone Number</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____

Additional children and information can be listed on the back.

GRANDCHILDREN (only those whose parents are deceased from question 5)

- 6. The deceased had no grandchildren.
- The deceased had the following grandchildren (living and deceased).

Grandchild's Name	Mailing Address (or date of death, if deceased)	Phone Number
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		

ADOPTION DETAILS (if applicable) **NO ADOPTIONS**

- 7. Did the deceased **LEGALLY** adopt the child(ren) indicated in question 5? YES NO
Can adoption decrees be provided? YES NO UNKNOWN
If yes, please attach if available. If no or unknown, please explain below.

- 8. Did the deceased have any children which, though **NOT LEGALLY** adopted, they Considered adopted? (*Tribal adoption*) YES NO **If yes, provide explanation:**

- a) Was this “tribal” adoption recognized by other family members? YES NO
- b) Was this “tribal” adoption recognized by the village? YES NO Please explain:

- 9. Did the deceased have children who were adopted by others? YES NO
If yes, list names and contact information.

- a) Can adoption decrees be provided? YES NO UNKNOWN

- 10. Were there any other adoptions that can affect who will inherit shares?

PARENTS OF DECEASED

11. PARENTS: Father's Name: _____ Deceased? YES _____ NO
(Date of death)

If living, provide current mailing address _____ Phone Number _____

Mother's Name _____ Deceased? YES _____ NO

(Date of death)

If living, provide current mailing address _____ Phone Number _____

EXTENDED FAMILY

12. Complete sections A & B **ONLY** if the decedent was **NOT** married, had **NO** children and was **NOT** survived by parents and did **NOT** have a will devising his/her ANCSA stock.

(A) Brothers & Sisters: Please use back of form if more space is needed. Remember to note in which section the information belongs.

Name _____ **Mailing Address** (or date of death, if deceased) _____ **Phone Number** _____

- 1. _____
- 2. _____
- 3. _____
- 4. _____

If any brothers or sisters are deceased but had children, list those children.

(B) Nieces & Nephews: Please use back of form if more space is needed. Remember to note in which section the information belongs.

Name _____ **Mailing Address** (or date of death, if deceased) _____ **Phone Number** _____

- 1. _____
- 2. _____
- 3. _____
- 4. _____

Please read carefully:
DO NOT SIGN UNTIL YOU ARE IN FRONT OF A NOTARY OR POSTMASTER

I understand the purpose of this questionnaire and affidavit and I can swear to the truth of the facts stated because I am the _____ to the deceased.

(Relationship)

I have completed this form to the best of my knowledge about the decedent and I know of no other fact which might affect who is entitled to the stock. I understand that the stock will be transferred by Evansville, Incorporated stock will or AS.13.16.705(b) will or formal will or Alaska, or other state, laws on Intestacy whichever one applies.

I have answered the questions above to the best of my knowledge. By signing below, I agree to defend, indemnify and hold harmless Evansville, Incorporated from any and all claims, losses or actions, including costs and attorney's fees, arising out of Evansville, Incorporated's reliance upon the information I have provided in this affidavit.

I am signing this Inheritance Questionnaire and Affidavit before a Notary Public/Postmaster at:

(City) _____, **(State)** _____ on this _____ day

of _____, 20_____.

Signature

Address

City, State, Zip Code

Telephone/E-Mail Address

State of _____
_____ Judicial District

Subscribed, sworn to and acknowledged before me this _____ Day of _____ 20_____.

Notary Public or Postmaster

In and For the State of

My Commission Expires

