

STATE OF SOUTH CAROLINA)
)
 COUNTY OF: _____)
)
 IN THE MATTER OF: _____)
)

IN THE PROBATE COURT

**AFFIDAVIT FOR COLLECTION OF PERSONAL PROPERTY
 PURSUANT TO SMALL ESTATE PROCEEDING**

CASE NUMBER: _____

AFFIANT: _____

1. Nature of interest of undersigned: _____

2. Decedent's Information:

Name: _____
 Last Four Digits of Social Security Number: XXX-XX- _____
 Date of Birth: _____
 Date of Death: _____
 Age at date of Death: _____
 Domicile at death: _____

3. Venue for this proceeding is proper in this county because:

- Decedent was domiciled in this county at date of death.
- Decedent was not domiciled in this county, but property of Decedent was located in this county at date of death.

4. No Application or Petition for the appointment of a Personal Representative is pending or has been granted in any jurisdiction. More than thirty (30) days have passed since the decedent's death. The value of the entire probate estate, less liens and encumbrances, does not exceed \$10,000.

5. This affidavit is pursuant to Section 62-3-1201 of the South Carolina Probate Code (Supp. 1990). The successor(s) named herein is/are entitled to the payment of any sums of money due and owing to the decedent, and to the delivery of all tangible personal property belonging to the decedent and in the possession of another, and to the delivery of all instruments evidencing a debt, obligation, stock, or chose in action belonging to the decedent, in the following respective proportions. Names and addresses of the decedent's spouse, children, heirs and devisees, including minors' dates of birth are:

Name	Age	Address	Relation	Percentage Interest
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

6. The property of the decedent consists of:

Cash: \$ _____
 Automobile: \$ _____
 Life Insurance: \$ _____
 Other Property: \$ _____ (attach list if necessary)

VERIFICATION

The undersigned, being sworn, states: That the facts set forth in the foregoing statement are true to the best of the undersigned's knowledge, information and belief; and the undersigned hereby submits to the Court's jurisdiction in this matter.

SWORN to before me this _____ day of _____, 20 _____

Signature: _____

Name: _____

Address: _____

Notary Public for South Carolina
My Commission Expires: _____

Telephone (O): _____

(H): _____

E-mail: _____

ORDER FOR PAYMENT OR DELIVERY

It appears from the foregoing affidavit, the original of which is on file with the probate court of this county, that payment or delivery of the property described herein should be made as follows:

Name of Successor	Address	Relationship	Percentage Interest
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Executed this _____ day of _____, 20_____.

_____, Probate Court Judge