

# Affidavit for Collection of Personal Property

Mail to: Arizona Department of Revenue • Unclaimed Property Unit • PO Box 29026 • Phoenix, AZ 85038

<b>1 Please print or type your answers to each question:</b>	
1a. Name of Decedent ▼	1b. Date of Death  M M D D Y Y Y Y
1c. Name of Decedent's Spouse ▼  <input type="checkbox"/> Not married at time of death	1d. Spouse's Date of Death (if now deceased)  M M D D Y Y Y Y
<b>Attach the decedent's death certificate to this affidavit.</b>	

<b>2 An answer for each question in Section 2 is required. Carefully read the instructions for questions answered, "Yes".</b>	
2a. Did the decedent have a valid will as defined by A.R.S. §§14-2501 to 2517?	<input type="checkbox"/> <b>No</b> If " <b>Yes</b> ", <b>attach a complete copy of the valid will and trust</b> if one is mentioned in the will. Payment will be issued per the terms of the will/trust. <input type="checkbox"/> <b>Yes</b>
2b. Is an application for appointment of personal representative pending, or has a personal representative been appointed?	<input type="checkbox"/> <b>No</b> If " <b>Yes</b> ", only the assigned personal representative may claim. <b>Attach a copy of your Letters of Office certified within 60 days.</b> <input type="checkbox"/> <b>Yes</b>
2c. Was the value of all personal property in the decedent's estate, wherever located, less liens and encumbrances, valued <b>above</b> \$75,000 at the date of death or date of affidavit, pursuant to A.R.S. §§14-3971(B)(2) to 14-3971(B)(2)(b)?	<input type="checkbox"/> <b>No</b> If " <b>Yes</b> ", the State of Arizona requires probate for this estate. <b>Attach the certified Decree of Distribution for a closed estate or, once probate has been initiated, the personal representative may claim; see 2b.</b> <input type="checkbox"/> <b>Yes</b>

<b>3 Choose one option in Section 3, and provide the requested information:</b>	
3a. <input type="checkbox"/>	As a rightful heir of the decedent, I am claiming the payment of the decedent's personal property held by the Arizona Department of Revenue's Unclaimed Property Unit that I am entitled to because of my relationship to the decedent of:  <b>Your relationship to the decedent ►</b>
3b. <input type="checkbox"/>	I hereby unconditionally and irrevocably assign, grant, and transfer all rights, title, interest, and obligation in all unclaimed property held by the Arizona Department of Revenue's Unclaimed Property Unit in the name of the decedent to:  <b>Name of heir you are assigning to ►</b>
<b>Each heir that wishes to assign their rights must fully complete this affidavit, choose option 3b, and name the heir they wish to assign rights to. The heir accepting payment must file a claim and provide supporting evidence including their own affidavit.</b>	

<b>4 Please print or type your answers to each question:</b>			
4a. Name of Decedent's Descendants (children, grandchildren, etc.) <input type="checkbox"/> Decedent had no children	4b. Relationship to Decedent	4c. Relationship to You	4d. Date of Death (if now deceased)
<b>To list more than six descendants, attach a page showing additional names.</b>			

**Form must be signed and notarized.**

**YOU MUST LIST BELOW ANY ADDITIONAL HEIRS AS DEFINED BY A.R.S. §§14-2102-14-2106.**

<b>5</b> If the decedent was not survived by a spouse or descendants, provide the following parent information:	
<b>5a.</b> Name of Decedent's Father ▼	<b>5b.</b> Father's Date of Death (if now deceased) M,M D,D Y,Y Y,Y
<b>5c.</b> Name of Decedent's Mother ▼	<b>5d.</b> Mother's Date of Death (if now deceased) M,M D,D Y,Y Y,Y

<b>6</b> If the decedent was not survived by any family member previously listed, list in Section 6 the decedent's parents' descendants (siblings, nieces, nephews):			
<b>6a.</b> Name of Decedent's Parents' Descendants (children, grandchildren, etc.)	<b>6b.</b> Relationship to Decedent	<b>6c.</b> Relationship to You	<b>6d.</b> Date of Death (if now deceased)
<b>To list more than four decedent's parents' descendants, attach a page showing additional names.</b>			

<b>7</b> If the decedent was not survived by any family member previously listed, provide the following information:			
<b>7a.</b> Decedent's Paternal Grandfather ▼	Date of Death M,M D,D Y,Y Y,Y	<b>7b.</b> Decedent's Maternal Grandfather ▼	Date of Death M,M D,D Y,Y Y,Y
<b>7c.</b> Decedent's Paternal Grandmother ▼	Date of Death M,M D,D Y,Y Y,Y	<b>7d.</b> Decedent's Maternal Grandmother ▼	Date of Death M,M D,D Y,Y Y,Y

<b>8</b> If the decedent was not survived by any family member previously listed, list in Section 8 the decedent's grandparents' descendants (aunts, uncles, cousins):			
<b>8a.</b> Name of Decedent's Grandparents' Descendants (children, grandchildren, etc.)	<b>8b.</b> Relationship to Decedent	<b>8c.</b> Relationship to You	<b>8d.</b> Date of Death (if now deceased)
<b>To list more than four decedent's grandparents' descendants, attach a page showing additional names.</b>			

I swear and attest that all claims, assertions and signatures made in this affidavit are true and material, and I acknowledge that any false statement in this affidavit may subject me to penalties related to perjury and the subornation of perjury.

\_\_\_\_\_  
**Signature ▲**

\_\_\_\_\_  
**Date ▲**

STATE OF \_\_\_\_\_ )

COUNTY OF \_\_\_\_\_ )

Subscribed and sworn before me this \_\_\_\_ day of \_\_\_\_\_,  
20\_\_\_\_, by:

(Notary Seal)

\_\_\_\_\_  
*PRINT NAME OF SIGNOR*

\_\_\_\_\_  
**NOTARY PUBLIC**