

**LIST OF HEIRS  
COMMONWEALTH OF VIRGINIA**

**FLUVANNA COUNTY CIRCUIT COURT**

\_\_\_\_\_  
NAME OF DECEDENT

\_\_\_\_\_  
DATE OF DEATH

I / We, the undersigned, hereby state under oath that the following are all of the heirs of the Decedent:

	<b>NAME OF HEIRS</b>	<b>ADDRESS</b>	<b>RELATIONSHIP</b>	<b>AGE</b>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____
7.	_____	_____	_____	_____
8.	_____	_____	_____	_____
9.	_____	_____	_____	_____
10.	_____	_____	_____	_____
11.	_____	_____	_____	_____
12.	_____	_____	_____	_____
13.	_____	_____	_____	_____
14.	_____	_____	_____	_____
15.	_____	_____	_____	_____

**Please list anyone who is an Heir at Law or an Heir of the Last Will and Testament of the Decedent.**

I (we) hereby certify that to the best of my (our) knowledge and belief this is an accurate statement of facts, and I (we) acknowledge a continuing legal duty to report any later discovered errors or inconsistencies to the Clerk of Court.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Requesting Person

\_\_\_\_\_  
Signature of Requesting Person

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Requesting Person

\_\_\_\_\_  
Signature of Requesting Person