



STATE OF ALABAMA
UNCLAIMED PROPERTY DIVISION
P. O. Box 302520 Montgomery, AL 36130-2520
Toll Free 888-844-8400 Fax 334-242-9620
Email: unclaimed@treasury.alabama.gov
www.treasury.alabama.gov

CLAIM BY CHILD(REN) OF A PERSON WHO DIED INTESTATE

Purpose of Affidavit:

Section 35-12-84(a), *Code of Alabama 1975*, provides that the surviving child or children of a person who has died intestate (without a Last Will and Testament), and who did not have a surviving spouse, may have a right to Unclaimed Property (up to \$3,000) of the deceased parent under certain circumstances. If your parent (1) died intestate, (2) has no surviving spouse, and (3) no estate has been or will be opened in the probate court, you may complete this form for a determination of eligibility for Unclaimed Property for which your parent was the Apparent Owner.

If approved, one check will be issued and payable to claimant (person signing the claim form). Only one child will be considered the claimant and sign the claim form. However, each surviving child must complete the affidavit.

Required Documentation to be submitted with claim:

1. Executed Unclaimed Property claim form
2. A copy of your driver's license or government-issued identification card
3. A copy of the certified death certificate(s) of your deceased parent(s)
4. A list of the surviving children complete with: current mailing address, telephone number, and e-mail address. If a surviving child is under the age of nineteen (19) years, provide the name and address of the legal guardian of the minor child
5. A copy of the birth certificates for all surviving children
6. A signed and notarized affidavit by each surviving child (See "Affidavit of Claimant/Children of Decedent")
7. Written confirmation from the Probate Court (or other court if residing out-of-state) in the county in which the decedent resided at the time of his or her death, or his or her county of residence if different, stating that no estate has been opened in the name of the decedent (use form provided by Unclaimed Property Division titled "Statement of No Estate")

For Treasury Use:

Reference property # _____ Claim # _____ Total assets held \$ _____

Affidavit of Claimant/Children of Decedent

(The Claimant and each Surviving Child of the Deceased Must Complete this Affidavit)

I am a surviving child of _____ (Decedent), over the age of nineteen (19) years, and have personal knowledge of the information contained in this affidavit. The information is true and correct to the best of my knowledge. The surviving children of the Decedent have amicably agreed among ourselves on how any Unclaimed Property received will be divided. The Unclaimed Property Division is hereby authorized to release any property to which I may be entitled to _____ (The Claimant and Sibling Signing the Unclaimed Property Claim form).

The Decedent has no surviving spouse and was a resident of the State of _____, County of _____ at the time of death. The Decedent died without having a Last Will and Testament and no estate has been or will be opened in the Decedent’s name in any court. The list of surviving children provided to the Unclaimed Property Division is true and correct.

The records of the Unclaimed Property Division show that the Decedent was the Apparent Owner of property that has been submitted to the Unclaimed Property Division and a claim for that property has been filed. I understand that I may be requested to provide additional or other documentation or evidence to establish ownership rights to the property and that if I fail to do so the claim may be denied without further action.

I hereby release, indemnify and hold harmless the Office of State Treasurer, the Unclaimed Property Division, its officers, employees and agents, against all claims based upon actions taken in reliance upon information I have provided in support of this claim.

I understand that if other persons are entitled to share or claim this property but did not receive said property, they may enforce their rights in a legal proceeding against the persons who did receive the property, including me if I received any of the property. The Unclaimed Property Division is hereby authorized to release my name and address to any subsequent claimant.

Done this ____ day of _____, 20____.

Print Name

Signature

Daytime Telephone Number: (____) _____ - _____

STATE OF _____

COUNTY OF _____

Before me, the undersigned authority, personally appeared _____, who is known to me and who, upon being duly sworn, deposed and said that he/she has read the **foregoing Affidavit**, signed it voluntarily, and that it is true and correct to the best of his/her knowledge and belief.

Sworn to and Subscribed before me on this the ____ day of _____, 20____.

(Affix Seal Here)

Notary Public
My Commission Expires: _____

For Treasury Use:

Reference property # _____ Claim # _____