



Barbour County Commission



Estate of: \_\_\_\_\_

Date of Death: \_\_\_\_\_

**AFFIDAVIT FOR ANCILLARY ADMINISTRATION OF  
WEST VIRGINIA REAL ESTATE WITHOUT APPOINTMENT  
TESTATE**

STATE OF WEST VIRGINIA  
COUNTY OF BARBOUR, to wit:

I, \_\_\_\_\_, whose address is \_\_\_\_\_  
\_\_\_\_\_

Being first duly sworn, upon oath and under penalty of perjury, do depose and say as follows:

- 1) The decedent, \_\_\_\_\_, died testate (with a Will) on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_,
- 2) On the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, the following person(s) was/were appointed as the personal representative of the Estate of \_\_\_\_\_, by the Court of \_\_\_\_\_ County, \_\_\_\_\_ State, being case number \_\_\_\_\_ (if applicable):
  - a. Name: \_\_\_\_\_  
Address: \_\_\_\_\_
  - b. Name: \_\_\_\_\_  
Address: \_\_\_\_\_
- 3) An authenticated copy of the Last Will & Testament dated \_\_\_\_\_ and the certificate of probate of such other state or jurisdiction is being furnished herewith for recording in this County.
- 4) The Decedent died owning and possessing the following real estate situate in West Virginia.

Description	Map/Parcel	County	Assessed Value	Fair Market Value
a) _____				
b) _____				
c) _____				
d) _____				

TOTAL: \_\_\_\_\_

5) Pursuant to the provisions of the Last Will & Testament of \_\_\_\_\_  
\_\_\_\_\_, the decedent devised the aforesaid real estate to the following  
beneficiaries of the estate:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship to Decedent: \_\_\_\_\_

Share or Percentage: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship to Decedent: \_\_\_\_\_

Share or Percentage: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship to Decedent: \_\_\_\_\_

Share or Percentage: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship to Decedent: \_\_\_\_\_

Share or Percentage: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship to Decedent: \_\_\_\_\_

Share or Percentage: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship to Decedent: \_\_\_\_\_

Share or Percentage: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship to Decedent: \_\_\_\_\_

Share or Percentage: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship to Decedent: \_\_\_\_\_

Share or Percentage: \_\_\_\_\_

6) The Estate of \_\_\_\_\_, the decedent, will be/has been fully administered by the domiciliary personal representative under the domiciliary proceedings in the other state or jurisdiction. No appointment of an ancillary personal representative to administer the decedent's real estate within the State of West Virginia is necessary for any proper purpose.

7) I have personal knowledge of the above facts and am interested in the Estate of \_\_\_\_\_, the decedent, as the ( ) acting domiciliary personal representative, ( ) surviving spouse, ( ) beneficiary under the decedent's Will, ( ) heir at law, or ( ) other \_\_\_\_\_.

\_\_\_\_\_  
Signature of Affiant

Taken, subscribed, and sworn to before me the undersigned authority by

\_\_\_\_\_, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_

My Commission Expires: \_\_\_\_\_

Notary Public : \_\_\_\_\_

Laurie L Austin  
Barbour County Commission  
26 N Main Street  
Philippi WV 26416