|   | Estate                               | e No   |
|---|--------------------------------------|--|
| AFFIDAVIT OF NOTICE REGARDING EST   | TATE OF                              |  |
| (who died on  | )                                    |  |
| I, the undersigned, state under oath/affirm the following: (Check the applicable block)   |                                      |  |
| 1. [ ] I am a personal representative of the estate of the c  |                                      |  |
| <ul><li>[ ] I am a proponent of the will of the deceased person named above.</li><li>[ ] I am a person with an interest in the estate of the deceased person named above.</li></ul> |                                      |  |
|   |                                      |  |
| OR  |                                      |  |
| [ ] I mailed or delivered within 30 days of qualification following persons shown below:  | on (or probate) a copy of the notice | required by Va. Code § 64.1-122.2 to the         |
| NAME ADDRESS WHER   | E MAILED OR DELIVERED                | DATE MAILED OR DELIVERED                         |
| a   |                                      |  |
| b   |                                      |  |
| c   |                                      |  |
| d   |                                      |  |
| e   |                                      |  |
| (Check if applicable)   |                                      | (Continue on other side if more space is needed) |
| 3. [ ] After exercising reasonable diligence, I have been is required:  | unable to determine the address of   | the following persons to whom such notice        |
| After exercising reasonable diligence, I have been (such as a child of the deceased person) who may be a child of the deceased person.  |                                      | ddresses of the persons described below          |
| DATE  | SIGNATURE                            |  |
| Commonwealth/State of   | [ ] City [ ] County o                | f  |
| Subscribed and sworn to/affirmed before me on this  |                                      |  |
|   | •                                    |  |
| by  | PRINT NAME(S)                        |  |
| DATE  |                                      | TY CLERK [ ] NOTARY PUBLIC                       |
|   |                                      |  |
| NOTICE: This affidavit must be recorded in the Clerk's off  | ice where the personal representativ | ve qualified or the will was probated.           |
| VIRGINIA: In the Clerk's Office of the  |                                      | Circuit Court                                    |
| this day of   |                                      |  |
| The foregoing Affidavit of Notice was this day admitted to r  |                                      |  |
| ·   | Teste:                               | , Clerk  |
|   | by:                                  |  |