|  |  |  |
| --- | --- | --- |
| STATE OF SOUTH CAROLINA | ) | IN THE PROBATE COURT |
|  | ) |  |
| COUNTY OF GREENVILLE | ) | **AFFIDAVIT OF DISTRIBUTION**  |
|  | ) | **FOR PERSONAL PROPERTY** |
| IN THE MATTER OF:  | ) |  |
|  | ) | CASE NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| (Decedent) | ) |  |

WHEREAS, the Decedent died on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; and,

WHEREAS, the undersigned Personal Representative is the duly appointed and qualified fiduciary in this matter; and,

NOW, THEREFORE, in accordance with the laws of the State of South Carolina, the Personal Representative has transferred and released the following described in-kind distribution of personal probate property assets to the heirs and/or devisees as listed on the Inventory and Appraisement such as stocks, bonds, securities, vehicles, household goods and/or other personal property items that were not sold,

 Name of person receiving the asset Specific Property Description Percentage Inherited

|  |  |  |
| --- | --- | --- |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**I confirm/attest that I have transferred the above asset(s) out of the Decedent’s name.**

 Executed this \_\_\_\_\_\_\_day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_.

|  |  |  |
| --- | --- | --- |
| SWORN to before me this \_\_\_\_\_\_\_\_ day of | Signature: |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_ | Print Name: |  |
|  | Address: |  |
| Notary Public for South Carolina |  |  |
| My commission expires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Telephone (Work): |  |
|  | (Home): |  |
|  | (Cell): |  |
|  | Email: |  |
|  |  |
| Attorney: |  |
| Address: |  |
|  |  |
| Telephone: |  |
| Email: |  |