I, the undersigned, surviving spouse of ____________________________________________, swear that the following statements are true to the best of my knowledge.

A. ______________________________________ (name of Decedent) died on the _____ day of ________________, 19____ / 20 ____.

B. At the time of his/her death, the decedent was married to __________________________ the holder of State Grazing Lease No. ______________. Therefore, the State Grazing Lease was considered community property, and will automatically be transferred to the Surviving Spouse.

C. (Please check one of the following as true). If you check No. 2, fill in the blanks:
   _____ 1. The estate of the Decedent has never been probated.
   _____ 2. The Estate of the Decedent has been probated in the _____________ County District/Probate Court as Cause No. _____________. The Decedent’s State Grazing Lease No.______________ was not included as an asset of the estate in that probate proceeding.

__________________________________
Signature of Surviving Spouse

State of _______________
County of _____________

The foregoing Surviving Spouse Affidavit was subscribed and sworn to before me this ______ day of _____________, 20____, by _________________________________________________________________.

(Notary must write name of the Surviving Spouse)

My Commission Expires: ________________

(Revised 11/10/2015)