

AOC-860 Doc. Code: AFPFE
Rev. 12-25
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Commonwealth of Kentucky
Court of Justice www.kycourts.gov
KRS 61.315



**AFFIDAVIT FOR PROBATE
FEE EXEMPTION**

Case No. _____
Court _____
County _____
Division _____

IN RE: Estate of _____
(Name of Decedent)

I, the undersigned Affiant, hereby swear and affirm that I am submitting the estate of the above-named Decedent,
(check one)

☐ a person whose spouse or surviving children are eligible for state death gratuity death benefits (the estate of any police officer, sheriff, deputy sheriff, corrections employee with the power of a peace officer pursuant to KRS 196.037, any metropolitan or urban-county correctional officer with the power of a peace officer pursuant to KRS 446.010, any jailer or deputy jailer, any auxiliary police officer appointed pursuant to KRS 95.445, any police officer of a public institution of postsecondary education appointed pursuant to KRS 164.950, any school resource officer as defined in KRS 158.441, or any citation or safety officer appointed pursuant to KRS 83A.087 and 83A.088, firefighter, or member of the Kentucky National Guard on state active duty pursuant to KRS 38.030, or a member of a state National Guard or a Reserve component on federal active duty under Title 10 or Title 32 of the United States Code who names Kentucky as home of record for military purposes, whose death occurs on or after July 1, 2002, as a direct result of an act in the line of duty, or emergency medical services personnel whose death occurs on or after November 1, 2015, as a direct result of an act in the line of duty).

OR

☐ a regular member of the United States Armed Forces who names Kentucky as home of record for military purposes, whose death occurred as a direct result of an act in the line of duty.

Accordingly, the estate is exempt from payment of all probate fees, including but not limited to those established by the Supreme Court of Kentucky pursuant to KRS 23A.200 and 24A.170, or imposed under KRS 24A.185, 64.012, and 172.180.

Affiant's Signature: _____ **Phone No.:** _____

Name (Printed): _____

Address: _____

Email: _____

Subscribed and sworn to before me by _____ on _____ in the county
(name) (month/day/year)
of _____,
(county) (state)

Name/Title

For Notaries: My commission expires: _____. My notary ID number is : _____.

Clerk: If this form is filed with a petition to probate an estate, collect no filing fees and present form AOC-860.1 to the judge for ruling.