Reset Form Print Form

Form **2305**

Missouri Department of Revenue

# Affidavit to Establish Title to Exempt Property

This form must accompany the title application.

| Estate Of | |
|---|---|
| State: Missouri | County |

| Affiant | | | County |
|---|---|---|---|
| Street Address | City | State | Zip |

**Decedent**

| Name | | Date of Death __ __/__ __/__ __ __ __ | County |
|---|---|---|---|
| Street Address | City | State | Zip |

**Surviving Spouse**

Spouse must have been married to decedent and not divorced or separated for more than one year prior to the death of the decedent.

| Name | | | County |
|---|---|---|---|
| Street Address | City | State | Zip |

**Decedents Unmarried Minor Children**

If decedent was not survived by a spouse, provide the names, dates of birth, and addresses of decedent's unmarried minor children (under the age of 18). The affiant must also identify their relationship to the children listed below.

| Name | Date of Birth (MM/DD/YYYY) | Address |
|---|---|---|
| | __ __/__ __/__ __ __ __ | |
| | __ __/__ __/__ __ __ __ | |
| | __ __/__ __/__ __ __ __ | |

The affiant's relationship to each of the above named unmarried minor children (under the age of 18) is: _____

**Motor Vehicle**

List the motor vehicle owned by the decedent below.

| Year | Make | Vehicle Identification Number | Model | Current License Number |
|---|---|---|---|---|
| | | | | |

**Nuptials**

Are there any pre-nuptial, antenuptial, or post-nuptial agreements concerning the personal property of the decedent? ☐ Yes ☐ No

If yes, a copy of the agreement must be attached.

**Signature**

Under penalties of perjury, I declare that the above information and any attached supplement is true, complete, and correct. I acknowledge that this is the only motor vehicle owned by the decedent that is being transferred to a surviving spouse or minor children (under the age of 18) as exempt property.

| Affiant's Signature | Date (MM/DD/YYYY) __ __/__ __/__ __ __ __ |
|---|---|

**Notary Information**

| Embosser or black ink rubber stamp seal | Subscribed and sworn before me, this _____ day of _____ year | | |
|---|---|---|---|
| | State | County (or City of St. Louis) | My Commission Expires (MM/DD/YYYY) __ __/__ __/__ __ __ __ |
| | Notary Public Signature | | |
| | Notary Public Name (Typed or Printed) | | |

Form 2305 (Revised 12-2014)

**Motor Vehicle Bureau**

**Phone:** (573) 526-3669

Visit **http://www.dor.mo.gov/** for additional information.