

**In the Matter of the Estate of Prince Rogers Nelson
First Judicial District
Carver County
Case No. 10-PA-16-46**

AFFIDAVIT OF _____

FILED

JUN 21 2016

CARVER COUNTY COURTS

Under oath, I respond to the questions below as follows:

1. What is your full name?
2. What is your birth date?
3. Where were you born?
4. Please provide a certified copy of your birth certificate.
5. What are the full names of your biological parents?
6. Were your biological parents married when you were born? (If yes, answer the subparts below.)
 - a. When were your parents married?
 - b. Where were your parents married?
 - c. What was your biological mother's maiden name?
 - d. Please provide a certified copy of your parents' marriage certificate or other proof of marriage.
 - e. Were your parents divorced? If so, please provide the date of the divorce and a certified copy of the divorce decree or other proof of divorce.
7. Were your biological parents married after you were born? (If yes, answer the subparts below.)
 - a. When were your parents married?
 - b. Where were your parents married?
 - c. What was your biological mother's maiden name?
 - d. Did the man who married your biological mother acknowledge his paternity of you in writing filed with a state registrar of vital records?
 - e. Was the man who married your biological mother named as your father on your birth record with his consent?
 - f. Was the man who married your biological mother obligated to support you under a written voluntary promise or by court order?
 - g. Please provide a certified copy of your parents' marriage certificate or other proof of marriage.
 - h. Were your parents divorced? If so, please provide the date of the divorce and a certified copy of the divorce decree or other proof of divorce.

8. If your parents were not married when you were born, had they attempted to marry each other by a marriage solemnized in apparent compliance with law, although the attempted marriage is or could be declared void, voidable or otherwise invalid? (If yes, answer the subparts below.)

a. What was the date of the attempted marriage?

b. Where did the attempted marriage take place?

c. Please provide proof of the attempted marriage.

d. If the invalid marriage was terminated by death, annulment, declaration of invalidity, dissolution or divorce, please provide the date of the termination and any proof of such termination.

9. If your parents did not marry or attempt to marry, did any man receive you into his home and openly hold you out as his biological child? If yes, please name the man and provide details and other evidence (e.g. sworn statements, photographs, documents) to support your answer.

10. If your parents did not marry or attempt to marry, did any man and your biological mother acknowledge the man's paternity of you in a writing signed by both of them under Minn. Stat. § 257.34 (copy attached) and filed with the state registrar of vital records? If yes, please provide a certified copy of such writing.

11. If your parents did not marry or attempt to marry, did any man and your biological mother execute a recognition of parentage of you pursuant to Minn. Stat. § 257.75 (copy attached)? If yes, please provide a certified copy of such recognition of parentage.

12. Is any other man presumed to be your father under any of the presumptions found in Minn. Stat. § 257.55 (copy attached)? If yes, please provide details, and also whether the other man signed a written consent if your father and mother signed a written acknowledgment of paternity under Request No 10 above.

13. Was your biological mother married to any man other than your biological father when you were born or within 280 days before your birth?

14. Does a judgment or order exist determining a parent and child relationship between you and one or more parents? If so, please provide details and a certified copy of such judgment or order.

15. Detail the actions taken by you to confirm that the responses to the above requests are true and accurate.

16. If you contend additional information is needed or should be considered by the Special Administrator to support your claim to be an heir, please provide such information.

Response: I am a descendant of Virginia Nelson Thompson, the sister of Clarence Nelson, the great grandfather of the Decedent.

Under penalties for perjury, I declare that I have read this document and I know or believe its representations are true and complete.

1. Lorraine M. Huddleston (maiden: Thompson)
2. November 12, 1939
3. Pensacola, FL
4. Enclosed birth certificate
5. James & Marie Thompson
6. Unknown
7. Unknown
8. Unknown
9. Unknown
10. Unknown
11. Unknown
12. No
13. No
14. No
15. N/A
16. I am a descendant of Virginia Nelson

Attached copies:

Birth Certificate }
Marriage Lic. } Lorraine Huddleston

Death Certificates
for James / Marie Thompson

Money Order 25.00

10922744453

STATE OF FLORIDA

OFFICE of VITAL STATISTICS
CERTIFIED COPY

1. PLACE OF BIRTH,
County Escambia District No. 14-01 State File No. 128277

Precinct Pensacola Precinct No. 14-54 Registered No. 994

City Pensacola No. 14-54

2. Full name of child Lorraine Thompson

3. Sex Female **4. Twin, triplet, or other births** 5. Number, in order of birth **6. Prenature** Full term **7. Legibly marked** Yes **8. Date of birth** Nov 17 39

9. Full name **FATHER** Willie James Thompson **MOTHER** Marie Foster

10. Residence (usual place of abode) 813 W Jackson **19. Residence (usual place of abode)** 813 W Jackson

21. Color or race Col **22. Age at last birthday** 19 **20. Color or race** Col **21. Age at last birthday** 16

13. Birthplace (city or place) Pensacola Fla **22. Birthplace (city or place)** Pensacola Fla

14. Trade, profession, or particular kind of work done, as SPINNER, SAWYER, BOOKKEEPER, etc. laborer **23. Trade, profession, or particular kind of work done, as HOUSEKEEPER, TYPIST, NURSE, CLERK, etc.** Housewife

15. Industry or business in which work was done, as SICK MILL, SAWMILL, BANK, etc. **24. Industry or business in which work was done, as OWNS HOME, LAWYER'S OFFICE, SHED, etc.**

16. Date (month and year) last engaged in this work Apr 13 39 **17. Total time (years) spent in this work** 1 yr **25. Date (month and year) last engaged in this work** Nov 11 39

27. Number of children of this mother at time of this birth and including this child: (a) 1 (b) 1 (c) 1 (d) 1 (e) 1 (f) 1 (g) 1 (h) 1 (i) 1 (j) 1 (k) 1 (l) 1 (m) 1 (n) 1 (o) 1 (p) 1 (q) 1 (r) 1 (s) 1 (t) 1 (u) 1 (v) 1 (w) 1 (x) 1 (y) 1 (z) 1

28. Stillborn No **29. Cause of stillbirth** None

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

30. I hereby certify that I attended the birth of this child, who was alive **31. (Signed)** Edward J. ...

32. Given name added from a supplemental report **33. Address** **34. Filed** 11-20-39

VOID IF ALTERED OR ERASED

VOID IF ALTERED OR ERASED

A. Wade, State Registrar

Date issued: DEC 07 2004

THE ABOVE SIGNATURE CERTIFIES THAT THIS IS A TRUE AND CORRECT COPY OF THE OFFICIAL RECORD ON FILE IN THIS OFFICE.
WARNING: THIS DOCUMENT IS PRINTED OR PHOTOCOPIED ON SECURITY PAPER WITH A WATERMARK OF THE GREAT SEAL OF THE STATE OF FLORIDA ON THE FRONT, AND THE BACK CONTAINS SPECIAL LINES WITH TEXT AND SEALS IN THERMOCHROMIC INK.



B1221007

CERTIFICATION OF VITAL RECORD



DOH FORM 1946 (02-04)

Marriage License

WAYNE COUNTY, MICHIGAN

State File No.
1067227
 Local File No.

To any person legally authorized to solemnize marriage in the State of Michigan,

Greeting:

Marriage must be solemnized within 30 days of date of issue in the State of Michigan between

LUCHES JOSEPH HUDDLESTON

and

LORRAINE MARIE THOMPSON

Full name of male

Full name of female

25

Negro

24

Negro

Age at last birthday

Color

Age at last birthday

Color

3443 Atkinson

2713 North Capitol, N.E.

Residence No.

Street

Residence No.

Street

Detroit 6, Michigan

Washington, D.C.

City

Zone No.

State

City

Zone No.

State

Salem, Ohio

Pensacola, Florida

Birthplace—city and state

Birthplace—city and state

Porter

Secretary

Occupation

Occupation

None

None

Number of times previously married

Number of times previously married

Charles Joseph Huddleston

Willie James Thompson

Father's full name

Father's full name

Willie Odell Johnson

Marie Laster

Mother's maiden name

Mother's maiden name

and whose

Maiden name (if a widow)

parent's or guardian's consent, in case she has not attained the age of eighteen years, has been filed in my office. An affidavit has been filed in this office, as provided by Public Act No. 128, Laws of 1887, as amended, by which it appears that said statements are true.

In witness whereof, I have signed and sealed these presents,

this 18th day of November A. D. 19 63

EDGAR M. BRANIGIN

Wayne County Clerk

Deputy County Clerk

L.S.

This marriage license VOID 30 days after date of issue.

Certificate of Marriage

Between Mr. **LUCHES JOSEPH HUDDLESTON** and M. **LORRAINE MARIE THOMPSON**

I hereby certify that, in accordance with the above license, the persons herein mentioned were joined in marriage by me, at **Detroit**, county of **Wayne**, MICHIGAN,

on the **30th** day of **November** A. D. 19 **63**, in the presence of

Willie Thompson of **Detroit, Michigan**, and

Sharon Harvey of **Detroit, Michigan**

Rev. Daniel C. Combs **Catholic Priest**

Signature of magistrate or clergyman

Official title

9844 Woodward Avenue Detroit 2, Michigan

Post office address

This space reserved for binding.



COPY must be delivered by the person solemnizing to one of the parties joined in marriage.

DUPLICATE*

No. 106722 1948

WAYNE COUNTY, MICH.

**LICENSE AND CERTIFICATE
OF MARRIAGE**

Handwritten names and illegible text

and

Handwritten names and illegible text

*THIS DUPLICATE LICENSE AND CERTIFICATE
must be delivered to one of the parties joined in
marriage.

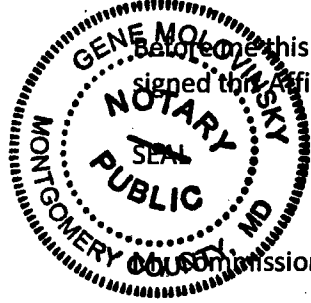
Dated: 6-14-16

By: Lorraine M. Huddleston
Affiant

Lorraine M. Huddleston
Printed Name

State of: Maryland
County of: Prince George

Before me this 14 day of June, 2016, Lorraine Huddleston appeared before and being sworn, signed the Affidavit.



Gene Molovsky
NOTARY

My commission expires: _____



Second:

1. Complete the Affidavit form (long form).
2. Answer as best you can and provide any documents that support your response.
3. Some questions will not apply to you, answer them: NA (Not applicable)
4. If you do not know the answer to a question, respond: Unknown at present time.
5. Have the Affidavit notarized.
6. Make a copy and mail, by June 17, 2016 the original to:

**Attn: Special Administrator
In the Matter of the Estate of Prince Rogers Nelson
Carver County Justice Center
604 East 4th Street
Chaska, MN55318**

By filing on this manner, you avoid a \$327.00 filing fee (per filing), which would have been assessed if you were represented by counsel/ plus attorney fees.

RECEIVED

JUN 20 2016

COURT ADMINISTRATION