Beneficiaries / Heirs of

Name of Decedent: _____

Age at time of death: _____ Date of Death: _____

Was the decedent married at any point during his/her life? _____ If so, list all marriages.

Spouse Full Name	Living / Deceased Divorced	Address

1) _____

2) _____

3) _____

List ALL biological children? (List full legal name, age - if under 18, and address or date of death)

1) _____

2) _____

3) _____

4) _____

5) _____

List any children the decedent had by adoption? (List full legal name, age – if under 18, and address or date of death)

1) _____

2) _____

3) _____

If any child/children predeceased the decedent, list the predeceased child's beneficiaries/heirs including: full legal name, age, address or date of death, and who the parent was.

1) _____

_____

2) _____

_____

3) _____

_____

4) _____

_____

List the full name, age, and current address or date of death of the following:

Father: _____

Mother: _____

Sibling: _____

Sibling: _____

Sibling: _____

Sibling: _____

Sibling: _____

Any other person(s) named as a Beneficiary in the Will (List full legal name, age – if under 18, and address or date of death:

1) _____

2) _____

3) _____

4) _____

5) _____

I have fully provided the above information to the best of my knowledge and ability. I understand that if I find any of the information is incorrect or changes, it is my responsibility to notify the County Clerk's Office know immediately for as long as the estate is open.

_____ _____

Date Signature

Phone Number: _____