



NAME	STATUS (Dead or Divorced)

**QUESTION 7** - Give the names and places of residence of all the surviving children of deceased, together with the other information called for:

**ANSWER:** (Give names of surviving children only)

NAME OF CHILD	ADDRESS	DATE OF BIRTH	IF NOT LIVING DATE OF DEATH	HUSBAND OR WIFE NAME

**QUESTION 8** - Give the name and address of any deceased children of the decedent, together with the other information called for:

**ANSWER:**

NAME OF CHILD	DATE OF BIRTH	DATE OF DEATH	SURVIVING HUSBAND OR WIFE NAME	DATE OF DEATH OF SPOUSE, IF APPLICABLE

**QUESTION 9** - If decedent was married at the time of death, are all of the above children of that marriage?  Yes  No

**QUESTION 10-** Give the names and addresses of the children of any deceased son or daughter of the decedent:

**ANSWER:**

NAME OF CHILD	ADDRESS OF IF NOT LIVING DATE OF DEATH	DATE OF BIRTH	NAME OF FATHER OR MOTHER

**QUESTION 11** - Did the decedent have any adopted children, or step-children taken into his home?

**ANSWER:**  Yes  No

If yes, provide their names, ages and addresses below:

NAME	ADDRESS	AGE

**QUESTION 12** - Did the decedent have any unpaid debts?

**ANSWER:**  Yes  No

If yes, provide as nearly as possible the amount of the debt and creditor and whether such debt has since been paid

**ANSWER:**

CREDITOR	AMOUNT OF DEBT	HAS DEBT NOW BEEN PAID

**QUESTION 13** - If the decedent left no children, then give below the names and addresses (together with other information called for), or his or her surviving father, mother, brothers, sisters:

**ANSWER:**

NAME	RELATIONSHIP	AGE	ADDRESS OR DATE OF DEATH

**QUESTION 14** - If the decedent left no children, spouse, mother, father, brother or sister, state all other known relatives:

**ANSWER:**

NAME	RELATIONSHIP	AGE	ADDRESS
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**QUESTION 15:** Did the decedent own any real estate in this state?:

**ANSWER:**  Yes  No

If yes, list

Address or short description : County:

Address or short description : County:

Address or short description : County:

Address or short description : County:

Address or short description : County:

**QUESTION 16:** What is your relationship to the deceased?

**ANSWER:**

*Please attach a copy of decedent's death certificate to this questionnaire.*