

**3 - TRUST PETITION INDIVIDUAL BENEFICIARY
CONTACT WORKSHEET**
[8-2022 Revision]

DECEDENT'S NAME	
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Please provide me with complete information for the following:

- Decedent's living spouse, children and stepchildren, if any
- Decedent's living parents, if any
- Decedent's living brother, sister, stepbrother or stepsister, if any
- The children of a predeceased child or stepchild of the Decedent
- Any other person named in Decedent's trust as a beneficiary
- The children of any predeceased beneficiary of Decedent's Trust
- The children of any predeceased child of a beneficiary of Decedent's trust

PLEASE INDICATE THE RELATIONSHIP OF THE PERSON TO THE DECEDENT

Person's Full Legal Name		
<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Adult <input type="checkbox"/> Minor If Minor, date of birth below	<input type="checkbox"/> Surviving Spouse <input type="checkbox"/> Surviving Domestic Partner <input type="checkbox"/> Son <input type="checkbox"/> Daughter <input type="checkbox"/> Stepson <input type="checkbox"/> Stepdaughter <input type="checkbox"/> Grandson <input type="checkbox"/> Granddaughter <input type="checkbox"/> Brother <input type="checkbox"/> Sister <input type="checkbox"/> Stepbrother <input type="checkbox"/> Stepsister <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Aunt <input type="checkbox"/> Uncle <input type="checkbox"/> Cousin	
	<input type="checkbox"/> Other (Please state)	
U.S. Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No	If not U.S. Citizen, citizen of	
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