

ABSTRACT OF ESTATE FILE NUMBER: _____
_____ COUNTY

DECEDENT: _____

Date of Death: _____

County of Domicile at Time of Death: _____

Decedent Died: _____ Intestate
_____ Testate Date of Last Will and Testament: _____
Date of Codicil(s) If Any: _____
Date Will Admitted to Probate: _____

Any information that indicates Decedent left a Last Will and Testament/Codicil which has not been admitted to probate? (___) Yes (___) No If Yes, indicate reason not admitted and source of information:

Personal Representative(s): _____

Date of Qualification of Personal Representative(s): _____

Persons/entities entitled to share in Decedent's estate *pursuant to above-captioned Estate File:*

NAME/MARITAL STATUS	AGE	RELATIONSHIP

Other persons that may be entitled to share in Decedent's estate based on information available in the public records or elsewhere (indicate source of information):

Affidavit of Publication of Notice to Creditors in Estate File? (___) Yes (___) No
If Yes: Dates published: _____
 Name of newspaper: _____
 County in which newspaper published: _____

Tax Release(s)/Certification(s) in Estate File? (___) Yes (___) No
If Yes: Date and description of release(s)/certification(s): _____

Final Account Filed? (___) Yes (___) No
If Yes: Date of Filing: _____

Attorney for Estate: _____

Notes/Remarks:

