



**NEW CLIENT FORM (cont.)**

**Heir Information (continued)**

Name: \_\_\_\_\_  
Age ("adult" if over 18): \_\_\_\_\_  
Street address: \_\_\_\_\_  
City, state, zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Relationship to decedent: \_\_\_\_\_

Name: \_\_\_\_\_  
Age ("adult" if over 18): \_\_\_\_\_  
Street address: \_\_\_\_\_  
City, state, zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Relationship to decedent: \_\_\_\_\_

Name: \_\_\_\_\_  
Age ("adult" if over 18): \_\_\_\_\_  
Street address: \_\_\_\_\_  
City, state, zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Relationship to decedent: \_\_\_\_\_

Name: \_\_\_\_\_  
Age ("adult" if over 18): \_\_\_\_\_  
Street address: \_\_\_\_\_  
City, state, zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Relationship to decedent: \_\_\_\_\_

Name: \_\_\_\_\_  
Age ("adult" if over 18): \_\_\_\_\_  
Street address: \_\_\_\_\_  
City, state, zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Relationship to decedent: \_\_\_\_\_

Name: \_\_\_\_\_  
Age ("adult" if over 18): \_\_\_\_\_  
Street address: \_\_\_\_\_  
City, state, zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Relationship to decedent: \_\_\_\_\_

Name: \_\_\_\_\_  
Age ("adult" if over 18): \_\_\_\_\_  
Street address: \_\_\_\_\_  
City, state, zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Relationship to decedent: \_\_\_\_\_

Name: \_\_\_\_\_  
Age ("adult" if over 18): \_\_\_\_\_  
Street address: \_\_\_\_\_  
City, state, zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Relationship to decedent: \_\_\_\_\_

Name: \_\_\_\_\_  
Age ("adult" if over 18): \_\_\_\_\_  
Street address: \_\_\_\_\_  
City, state, zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Relationship to decedent: \_\_\_\_\_

Name: \_\_\_\_\_  
Age ("adult" if over 18): \_\_\_\_\_  
Street address: \_\_\_\_\_  
City, state, zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Relationship to decedent: \_\_\_\_\_

**Notes:**