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| Denver Probate Court1437 Bannock Street, Room 230Denver, CO 80202**In the Matter of the Estate of:****Deceased**  | COURT USE ONLY |
| Attorney or Party Without Attorney (Name and Address): Phone Number: Email:FAX Number: Atty Reg. #:  | Case Number:Division Courtroom |
| DECEDENT’S FAMILY TREE |

* If there are no relatives in a section, write “None.”
* If a person’s date of death is unknown, indicate whether that person died before the decedent (by writing “predeceased”) or died after the decedent (by writing “post-deceased”).

**The person providing information, an interested person pursuant to § 15-10-201(27), C.R.S., makes the following statements:**

1. **Information about the person providing information:**

Name: Relationship to Decedent: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address:

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_ Zip Code: \_\_\_\_\_\_\_\_\_\_

Mailing Address, if different:

City: State: Zip Code:

Primary Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Alternate Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address:

**a)** **Decedent’s Marriages:**

❑ Decedent was never married.

**SURVIVING SPOUSE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

❑ Surviving spouse died after decedent.

**b)** **Decedent’s Children** (include non-marital children (born out of wedlock) and adopted children):

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| **NAME:** | **DATE OF DEATH (if deceased):** |
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**c)** **Decedent’s Grandchildren and Their Above-Named Parent:**

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| **NAME:** | **CHILD OF:** | **DATE OF DEATH (if deceased):** |
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**d)** **Decedent’s Great Grandchildren and Their Above-Named Parent:**

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| **NAME:** | **CHILD OF:** | **DATE OF DEATH (if deceased):** |
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**e) Decedent’s Great- Great Grandchildren and Their Above-Named Parent:**

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| --- | --- | --- |
| **NAME:** | **CHILD OF:** | **DATE OF DEATH (if deceased):** |
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1. **Decedent’s Parents:**

|  |  |
| --- | --- |
| **NAME:** | **DATE OF DEATH (if deceased):** |
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1. **Decedent’s Brothers and Sisters:**

|  |  |
| --- | --- |
| **NAME:** | **DATE OF DEATH (if deceased):** |
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1. **Decedent’s Nieces and Nephews and Their Above-Named Parent:**

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| **NAME:** | **CHILD OF:** | **DATE OF DEATH (if deceased):** |
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1. **Decedent’s Great Nieces and Nephews and Their Above-Named Parent:**

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| --- | --- | --- |
| **NAME:** | **CHILD OF:** | **DATE OF DEATH (if deceased):** |
|  |  |  |
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1. **Decedent’s Maternal Grandparents:**

|  |  |
| --- | --- |
| **NAME:** | **DATE OF DEATH (if deceased):** |
|  |  |
|  |  |

1. **Decedent’s Maternal Aunts and Uncles:**

|  |  |
| --- | --- |
| **NAME:** | **DATE OF DEATH (if deceased):** |
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1. **Decedent’s Maternal First Cousins and Their Above-Named Parent:**

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| --- | --- | --- |
| **NAME:** | **CHILD OF:** | **DATE OF DEATH (if deceased):** |
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1. **Decedent’s Paternal Grandparents:**

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| **NAME:** | **DATE OF DEATH (if deceased):** |
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|  |  |

1. **Decedent’s Paternal Aunts and Uncles:**

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| --- | --- |
| **NAME:** | **DATE OF DEATH (if deceased):** |
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1. **Decedent’s Paternal First Cousins and Their Above-Named Parent:**

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| **NAME:** | **CHILD OF:** | **DATE OF DEATH (if deceased):** |
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1. **Decedent’s Maternal Great Grandparents:**

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| **NAME:** | **DATE OF DEATH (if deceased):** |
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1. **Decedent’s Maternal Great Aunts and Uncles:**

| **NAME:** | **DATE OF DEATH (if deceased):** |
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1. **Decedent’s Paternal Great Grandparents:**

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| --- | --- |
| **NAME:** | **DATE OF DEATH (if deceased):** |
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1. **Decedent’s Paternal Great Aunts and Uncles:**

| **NAME:** | **DATE OF DEATH (if deceased):** |
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1. **Decedent’s Great-Great Grandparents:**

| **NAME:** | **DATE OF DEATH (if deceased):** |
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Signature of person who provided information Date completed

Printed name of person who provided information