

CAUSE NO. _____

IN THE ESTATE
OF

§ IN THE COUNTY COURT
§ AT LAW NO. 2 OF
§ HUNT COUNTY, TEXAS

EXECUTOR / ADMINISTRATOR GENERAL INFORMATION SHEET

EXECUTOR / ADMINISTRATOR INFORMATION			
Full Name:		Relationship to Deceased:	
Physical Address:			
Mailing Address:			
Birth Year:	Place of Birth <i>(City and State)</i> :		
Drivers License #: <i>(Last 3 Digits Only)</i>	Issuing State:	SSN#: <i>(Last 3 Digits Only)</i>	XXX-XX-X
Phone Numbers:	Cell	Home	Work
Email:			
Employer:			Occupation:
Business Address:			

CONTACT INFORMATION			
TWO INDIVIDUALS WHO WILL ALWAYS KNOW HOW TO CONTACT YOU			
#1	Contact Name:	Home Phone:	
	Email:	Cell Phone:	
Physical Address:			
Mailing Address:			
#2	Contact Name:	Home Phone:	
	Email:	Cell Phone:	
Physical Address:			
Mailing Address:			

I STATE THAT THE INFORMATION ON THIS FORM IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

DATE

EXECUTOR / ADMINISTRATOR