

Sandie Arnott TREASURER - TAX COLLECTOR

Tiffany Htwe ASSISTANT TREASURER Kathy Nunes
ASSISTANT TAX COLLECTOR

Unknown Heirs Claim Form

Claimant Declaration

Name and Address of Claimant					
Name					
Address					
Telephone	Street Address	Court Case #	City	State	Zip Code
Deceased Estate Being Claimed					
Name of Deceased					
Claim Amount					
What is your relationship to the decedent?					
Declaration of Claimant					
Claimant to include certified copy of Court Order which references the claimant involved in the preparation of this form.					
I declare under penalty of perjury that the information contained in this claim is true and correct. I further declare that the documents I have submitted are either originals or true copies of the originals and that said documents establish with documentary proof the existence of a blood relationship to either the decedent or the decedent's predeceased spouse. Signature of Claimant Dated					
Print Name					
Notary Acknowledgement					
Only complete if mailing this form in. Notary not needed if completing in presence of Treasurer's Office staff.					
State of		} ss.			
County of		}			
On (date) Personally appeared (or proved to me or this document and a WITNESS my hand a	d n the basis of satisfa acknowledged to m	actory evidence)	to be the person w	, personally ki hose name is subs	
				(Seal)