



MALIA M. COHEN
CALIFORNIA STATE CONTROLLER

TABLE OF HEIRSHIP

Deceased Owner Name:					Deceased Date:			
LIST ALL KNOWN RELATIVES <i>Enter "None" in any section for which there is no known relative. (If you need additional space, attach a second Table of Heirship identifying all missing relatives for all appropriate sections.)</i>								
Section 1		FIRST	MIDDLE	(MAIDEN) LAST	Date of			
					Marriage	Birth	Death	
Deceased Owner's Spouse(s)	1							
	2							
	3							
Section 2		FIRST	MIDDLE	(MAIDEN) LAST	Parent's Name (From Section 1)	Birth	Death	
Deceased Owner's Children	1							
	2							
	3							
	4							
	5							
	6							
	7							
	8							
Section 3		FIRST	MIDDLE	(MAIDEN) LAST	Parent's Name (From Section 2)	Birth	Death	
Deceased Owner's Grandchildren	1							
	2							
	3							
	4							
	5							
	6							
	7							
	8							

California State Controller's Office, Unclaimed Property Division
 Mailing Address P.O. Box 942850, Sacramento, CA 94250
 800.992.4647 (Nationwide) or 916.323.2827 (Outside of US)

Section 4		FIRST	MIDDLE	(MAIDEN) LAST	Birth	Death	
Deceased Owner's Parents	Father:						
	Mother:						
Section 5		FIRST	MIDDLE	(MAIDEN) LAST	Birth	Death	
Deceased Owner's Siblings	1						
	2						
	3						
	4						
	5						
Section 6		FIRST	MIDDLE	(MAIDEN) LAST	Parent's Name (From Section 5)	Birth	Death
Children of Deceased Owner's Siblings	1						
	2						
	3						
	4						
	5						
	6						
<p>I declare under penalty of perjury, under the laws of the State of California, that all statements contained in this Table of Heirship and any accompanying documents are true and correct, with full knowledge that all statements made in the Table of Heirship are subject to investigation and that any false or dishonest statement may be grounds for denial of the submitted claim.</p>							

Printed Name

Signature

Instructions

Deceased Owner Name	Enter the name of the deceased person whose property you are claiming.
Deceased Date	Enter the date the deceased property owner died.

To ensure you receive the funds to which you are entitled, enter the requested information for yourself and all the deceased property owner's known relatives, both living and dead. In addition, provide a copy of all pages of the certified death certificate for all deceased relatives listed in all Sections above your name to whom you are directly related (such as, your grandmother/grandfather, mother/father, and/or son/daughter)

Section 1	Include in this section all of the deceased property owner's current or former spouses. Enter one spouse per line (living or dead). If the deceased owner never married, enter "None"
Name	Enter the spouse's first, middle, (maiden name, if applicable) and last name.
Date of Marriage	Enter the spouse's date of marriage to the deceased property owner.
Date of Birth	Enter the spouse's date of birth.
Date of Death	If the spouse is deceased, enter the spouse's date of death.

Section 2	Include in this section all of the deceased property owner's children. Enter one child per line (living or dead). If the deceased owner did not have any children, enter "None"
Name	Enter the child's first, middle, (maiden name, if applicable) and last name.
Parent's Name (from Section 1)	Enter the first name of the child's parent, as listed in Section 1.
Date of Birth	Enter the child's date of birth.
Date of Death	If the child is deceased, enter the child's date of death.

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Section 3	Include in this section all of the deceased property owner's grandchildren. Enter one grandchild per line (living or dead). If the deceased owner did not have any grandchildren, enter "None"
Name	Enter the grandchild's first, middle, (maiden name, if applicable) and last name.
Parent's Name (from Section 2)	Enter the first name of the grandchild's parent, as listed in Section 2.
Date of Birth	Enter the grandchild's date of birth.
Date of Death	If the grandchild is deceased, enter the grandchild's date of death.

Section 4	Include in this section both of the deceased property owner's parents (living or dead).
Name	Enter the parent's first, middle, (maiden name, if applicable) and last name.
Date of Birth	Enter the parent's date of birth.
Date of Death	If the parent is deceased, enter the parent's date of death.

Section 5	Include in this section all of the deceased property owner's siblings. Enter one sibling per line (living or dead). If the deceased owner did not have any brothers or sisters, enter "None"
Name	Enter the sibling's first, middle, (maiden name, if applicable) and last name.
Date of Birth	Enter the sibling's date of birth.
Date of Death	If the sibling is deceased, enter the sibling's date of death.

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Section 6	Include in this section all of the deceased property owner's nieces and nephews. Enter one niece and nephew per line (living or dead). If the deceased owner did not have any nieces and nephews, enter "None"
Name	Enter the niece or nephew's first, middle, (maiden name, if applicable) and last name.
Parent's Name (from Section 5)	Enter the first name of the niece or nephew's parent, as listed in Section 5.
Date of Birth	Enter the niece or nephew's date of birth.
Date of Death	If the niece or nephew is deceased, enter the niece or nephew's date of death.

For a tutorial on completing this form, visit https://sco.ca.gov/upd_form_claim.html