



Unique ID#: 8 3 0 2 2 0 0 0 0 0 0 0

HEIRSHIP FORM
Requested Information

A. Provide the following information about the person submitting this form:

1. Current Name: _____

2. Current Address: _____

3. Current Telephone Number: (_____) - _____ - _____

4. Current Email Address: _____ @ _____

5. Relationship to the Deceased Victim: _____

B. List the name, current mailing address and relationship of each person and/or entity who is an heir of the Deceased Victim and who succeeded to the Deceased Victim's interests and each heir and each heir's share (e.g., 1/2, 1/3, etc.). If there are more than five such heirs, please attach a complete list with all relevant information.

Heir 1:

_____ MI _____
Legal First Name Legal Last Name

Mailing Address: _____

Relationship to Deceased Victim: _____ Share: _____

Heir 2:

_____ MI _____
Legal First Name Legal Last Name

Mailing Address: _____

Relationship to Deceased Victim: _____ Share: _____





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Heir 3:

Legal First Name MI Legal Last Name

Mailing Address: _____

Relationship to Deceased Victim: _____ Share: _____

Heir 4:

Legal First Name MI Legal Last Name

Mailing Address: _____

Relationship to Deceased Victim: _____ Share: _____

Heir 5:

Legal First Name MI Legal Last Name

Mailing Address: _____

Relationship to Deceased Victim: _____ Share: _____

C. Attach copies of following documents (please DO NOT send originals as they will not be returned). **Please include as much information as possible to support your completed Heirship Form**

Information provided:

- 1) A valid form of picture identification from the person submitting this form, such as a driver's license;
- 2) Documentation supporting any requested change in name from the person submitting this form, such as a marriage certificate;
- 3) A death certificate of the Deceased Victim;
- 4) Either:
 - a) Valid proof that the potential heir is the current legal representative of the Deceased Victim' estate (i.e., an order from an appropriate probate court demonstrating the potential heir is the Deceased Victim's executor or administrator); or
 - b) the Deceased Victim's signed and dated will; or
 - c) the Deceased Victim's family trust designating the trust's trustee(s) and Deceased Victim's beneficiaries.
- 5) Documentation, such as probate court orders, wills, and trusts, that evidence the undersigned and the person(s) identified in paragraph B, above, succeeded to the Deceased Victim's interests.
- 6) Any additional information to support any of the above documentation such as the Deceased Victim's obituary.





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Your signature on this Heirship Form constitutes your representation under penalty of perjury under the laws of the United States of America, that the information provided on this form and the supporting documents provided with this form, including that all heirs have been identified on this Heirship Form, are true and correct to the best of your knowledge, information, or belief. You further understand that if you receive any monies under this DPA, you are accountable for them to any personal representative of the estate (if one is appointed) and to any other person who has a superior right. By signing this Heirship Form you acknowledge and affirm the above attestation and you agree to fully indemnify, defend and hold harmless Kroll, its directors, officers, agents, employees, and any successors or assigns against any and all claims that might be brought based on representations or misrepresentations made on this Heirship Form.

Signature: _____ Date: ____ / ____ / ____

State of

County of

On _____, _____ before me, a Notary Public in and for said County,

personally appeared _____, who acknowledged

that he/she/they did sign the foregoing documentation and that it is their act and deed.

Signature/Notary Public

Name/Notary Public _____

My commission expires: _____

You should send your completed Heirship Form to:

**USA v. Epsilon SOW 7
ATTN: Heirship Form
Kroll Settlement Administration
PO Box 225391
New York, NY 10150-5391**

If you have any questions about this form, please write to Kroll Settlement Administration at the address above or call 1-833-462-3477.



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