

**3a – ADDITIONAL TRUST PETITION INDIVIDUAL BENEFICIARY
CONTACT WORKSHEET [6-2025 Revision]**

Person's Full Legal Name			
☐ Male ☐ Female ☐ Adult ☐ Minor If a minor, date of birth below			
If a minor, date of birth →→→→→→→			
☐ Surviving Spouse ☐ Surviving Domestic Partner ☐ Son ☐ Daughter ☐ Stepson ☐ Stepdaughter ☐ Grandson ☐ Granddaughter ☐ Brother ☐ Sister ☐ Stepbrother ☐ Stepsister ☐ Father ☐ Mother ☐ Aunt ☐ Uncle ☐ Cousin ☐ Friend			
☐ Other Relationship			
U.S. Citizen ☐ Yes ☐ No		If not U.S. Citizen, citizen of →→→→→→→	
Street Address			
City, State and Zip Code			
Best Contact Telephone			
Best Personal Contact Email			

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