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Instructions for the filling of this form:

Print this form, fill it in and send it by U.S. mail or fax it to any of the following addresses:

IF BY MAIL:

Pérez Rodríguez & Pérez Quiñones Law Office
PO Box 245
Caguas, Puerto Rico 00725-0245

IF BY FAX:

(787) 746-4787

TELEPHONES: (787) 743-3050 / (787) 743-6822 / (787) 647-4631

INITIAL INFORMATION FOR INHERITANCE CASES

A – Information Related To The Principal Or Constituent (Person who died):

Name of the Principal: _____

Date of Death: _____

Place of Death: _____

Residential Address at the time of Death:

B - Information Related To The Person Submitting This Information:

Your Name: _____

Your Postal Address: _____

Your Phone Number(s): _____

Your FAX Number: _____ Your e-mail _____

State your relationship with the Principal of Constituent:

If you were family, state relationship: _____

If you were not family, state your interest in this Estate: _____
