



**SCHEDULE I**  
**DEBTS OF DECEDENT,**  
**MORTGAGE LIABILITIES & LIENS**

ESTATE OF

FILE NUMBER

Report debts incurred by the decedent prior to death that remained unpaid at the date of death, including unreimbursed medical expenses.

ITEM NUMBER	DESCRIPTION	VALUE AT DATE OF DEATH
1.		
<b>TOTAL</b> (Also enter on Line 10, Recapitulation)		\$