

Deceased Party Report

Region	District	Worker ID	Case Number	Child Name	Deceased Date	Payor Name	Deceased Flag	Date of Death	Payee Name	Deceased Flag	Date of Death
2	11	DRK6	3011						TEST, DAD	Y	09/10/03
2	11	DRKB	3022						TEST, MOM	Y	07/14/95
2	11	DRY6	3033	TEST, CHILD	07/15/02						
2	11	DRYL	3044						TEST, MOM	Y	04/13/04
2	11	DRYK	3055			TEST, DAD	Y	09/26/04			