



## PROBATE / TRUST ADMINISTRATION QUESTIONNAIRE

This form will provide information necessary for administering a probate proceeding. If you do not have enough room, you can write on the back or a separate sheet of paper.

Decedent: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Date of Death \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Decedent's Address at Time of Death:

Street: \_\_\_\_\_

City: \_\_\_\_\_

Zip: \_\_\_\_\_ Phone Number: \_\_\_\_\_

County: \_\_\_\_\_

Decedent's Place of Death (County): \_\_\_\_\_

\*Please provide certified copy of Death Certificate

Decedent's Estate Planning Documents:

Will dated: \_\_\_\_\_ (Please bring original Will to meeting)  
Personal Representative Name / Address / Phone: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Trust dated: \_\_\_\_\_ (Please bring original Trust Agreement to meeting)  
Trustee Name / Address / Phone: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

FAMILY INFORMATION (Spouse, Children, Parents (if surviving))

<u>NAME</u>	<u>RELATIONSHIP</u>	<u>AGE or BIRTHDATE</u>	<u>ADDRESS &amp; PHONE</u>
_____	_____	_____	_____ _____ _____
_____	_____	_____	_____ _____ _____
_____	_____	_____	_____ _____ _____
_____	_____	_____	_____ _____ _____
_____	_____	_____	_____ _____ _____
_____	_____	_____	_____ _____ _____

DEVISEE / BENEFICIARY INFORMATION (Persons named in Will or Trust to whom property is given)

<u>NAME</u>	<u>RELATIONSHIP</u>	<u>AGE / BIRTHDATE</u>	<u>ADDRESS &amp; PHONE</u>
_____	_____	_____	_____ _____ _____
_____	_____	_____	_____ _____ _____
_____	_____	_____	_____ _____ _____

<u>NAME</u>	<u>RELATIONSHIP</u>	<u>AGE / BIRTHDATE</u>	<u>ADDRESS &amp; PHONE</u>
_____	_____	_____	_____ _____ _____
_____	_____	_____	_____ _____ _____
_____	_____	_____	_____ _____ _____

ASSET INFORMATION

Please list all assets owned by the decedent at the time of death and provide supporting statements of value. Indicate if any assets are owned jointly or have beneficiary designations.

<u>Real property Type and Location:</u>	<u>How owned</u>	<u>Approx. Market Value</u>	<u>Approx. Mortgage Amount</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Bank Accounts: (checking, savings, CDs)

	<u>How Owned</u>	<u>Approx. Market Value</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Life Insurance or Retirement Accounts (Pensions, IRAs):

Company	Type	Beneficiary	Alt. Beneficiary	Value (Cash Value if life ins.)
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Other Investments (Brokerage Accounts, Stocks, Bonds, Loans, Business Interests, etc.):

<u>Type of Investment</u>	How <u>Owned?</u>	Approx. Market <u>Value</u>
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CREDITORS

Please list of any known debts or potential claims against the decedent and provide copies of supporting statements.

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