

Probate Organizer

Your Information

Full Name: _____
Address: _____
Cell Phone: _____ Home Phone: _____ Email: _____
What is your relationship to the Decedent (deceased person): _____
Are you the Executor/Administrator of the Estate? yes/no (circle)
Social Security Number: _____

Decedent's Information (Deceased Person)

Full Legal Name: _____
Usual Residence: _____
Date of Death: _____ Social Security #: _____
Birth Date: _____ Marital Status: _____
If married, spouse's name: _____

Does the Decedent have a Will? yes/no (circle)
Does the Decedent have a Trust? yes/no (circle)

If you are the Executor/Trustee, do you want to receive compensation for your service? yes/no

Decedent's Fiduciary Information

Name of Executor/Administrator/Personal Representative: _____
Address: _____
Phone: _____ Relationship to Decedent: _____

Decedent's Heirs at Law (Please list all of the decedent's heirs at law - list all of the living and deceased)

Name: _____
Relationship: _____ Birthdate: _____
Address: _____
Phone: _____ Marital Status: _____
Number of children: _____ Social Security #: _____

Name: _____
Relationship: _____ Birthdate: _____
Address: _____
Phone: _____ Marital Status: _____
Number of children: _____ Social Security #: _____

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Number of children: _____ Social Security #: _____

Name: _____
Relationship: _____ Birthdate: _____
Address: _____
Phone: _____ Marital Status: _____
Number of children: _____ Social Security #: _____

Decedent's Beneficiaries Named in the Will/Trust, if applicable (Please list all of the beneficiaries named in the Will/Trust- list all of the living and deceased)

Name: _____
Relationship: _____ Birthdate: _____
Address: _____
Phone: _____ Marital Status: _____
Number of children: _____ Social Security #: _____

Name: _____
Relationship: _____ Birthdate: _____
Address: _____
Phone: _____ Marital Status: _____
Number of children: _____ Social Security #: _____

Name: _____
Relationship: _____ Birthdate: _____
Address: _____
Phone: _____ Marital Status: _____
Number of children: _____ Social Security #: _____

Name: _____
Relationship: _____ Birthdate: _____
Address: _____
Phone: _____ Marital Status: _____
Number of children: _____ Social Security #: _____

Name: _____
Relationship: _____ Birthdate: _____
Address: _____
Phone: _____ Marital Status: _____
Number of children: _____ Social Security #: _____

Decedent's Asset Information

Real Estate (Please list all real estate owned by the decedent, including any interest in real estate owned.)

1. Address: _____
Owner's name(s): _____
Value of property: _____
Remaining balance owed: _____

2. Address: _____
Owner's name(s): _____
Value of property: _____
Remaining balance owed: _____

3. Address: _____
Owner's name(s): _____
Value of property: _____
Remaining balance owed: _____

4. Address: _____
Owner's name(s): _____
Value of property: _____
Remaining balance owed: _____

Bank Accounts (Please list all checking accounts, saving accounts, certificates of deposit "CDs", money market accounts, etc. held by the decedent or jointly owned.)

1. Financial Institution: _____
Account type: _____
Owner's name(s): _____
Account value: _____
Is it a transfer on death/payable on death account? yes/no

2. Financial Institution: _____
Account type: _____
Owner's name(s): _____
Account value: _____
Is it a transfer on death/payable on death account? yes/no

3. Financial Institution: _____
Account type: _____
Owner's name(s): _____
Account value: _____
Is it a transfer on death/payable on death account? yes/no

4. Financial Institution: _____
Account type: _____
Owner's name(s): _____
Account value: _____
Is it a transfer on death/payable on death account? yes/no

Decedent's Stock (Please list all stock owned by the decedent or jointly owned.)

1. Stock company name: _____
Number of shares: _____
Owner's name(s): _____
Total value: _____

2. Stock company name: _____
Number of Shares: _____
Owner's name(s): _____
Total value: _____

3. Stock company name: _____
Number of shares: _____
Owner's name(s): _____
Total value: _____

4. Stock company name: _____
Number of shares: _____
Owner's name(s): _____
Total value: _____

Decedent's Bonds (Please list all bonds owned by the decedent or jointly owned.)

1. Bond type: _____
Number of bonds: _____
Owner's name(s): _____
Total value: _____

2. Bond type: _____
Number of bonds: _____
Owner's name(s): _____
Total value: _____

3. Bond type: _____
Number of bonds: _____
Owner's name(s): _____
Total value: _____

4. Bond type: _____
Number of bonds: _____
Owner's name(s): _____
Total value: _____

Decedent's Investment Accounts (Please list all investment accounts owned by the decedent or jointly owned.)

1. Investment company: _____
Owner's name(s): _____
Account value: _____
2. Investment company: _____
Owner's name(s): _____
Account value: _____
3. Investment company: _____
Owner's name(s): _____
Account value: _____
4. Investment company: _____
Owner's name(s): _____
Account value: _____

Decedent's Life Insurance Policies and Annuities (Please list all life insurance and/or annuities owned by the decedent.)

1. Name of company: _____
Owner's name: _____
Policy/account number and insurance type: _____
Beneficiary (if known): _____
2. Name of company: _____
Owner's name: _____
Policy/account number and insurance type: _____
Beneficiary (if known): _____
3. Name of company: _____
Owner's name: _____
Policy/account number and insurance type: _____
Beneficiary (if known): _____
4. Name of company: _____
Owner's name: _____
Policy/account number and insurance type: _____
Beneficiary (if known): _____

Decedent's Retirement Plan(s) (Please list all pensions, profit sharing, IRAs, 401(K)s, etc. owned by the decedent.)

1. Name of company: _____
Account number and type of retirement plan: _____
Owner's name: _____
Value amount: _____
Beneficiary (if known): _____

2. Name of company: _____
Account number and type of retirement plan: _____
Owner's name: _____
Value amount: _____
Beneficiary (if known): _____

3. Name of company: _____
Account number and type of retirement plan: _____
Owner's name: _____
Value amount: _____
Beneficiary (if known): _____

4. Name of company: _____
Account number and type of retirement plan: _____
Owner's name: _____
Value amount: _____
Beneficiary (if known): _____

Decedent's Business Interest (Please include all general or limited partnerships, sole proprietorships, privately owned corporations, professional corporations, limited liability companies, oil interests, farm and ranch interests owned by the decedent or jointly owned.)

1. Name of business: _____
Ownership interest percentage: _____
Value: _____

2. Name of business: _____
Ownership interest percentage: _____
Value: _____

3. Name of business: _____
Ownership interest percentage: _____
Value: _____

4. Name of business: _____
Ownership interest percentage: _____
Value: _____

Personal Effects (Please include all personal effects such as furniture, jewelry, collections, antiques, furs, and other valuable personal property owned by the decedent.)

1. Type of personal effect: _____
Description: _____
Value: _____
2. Type of personal effect: _____
Description: _____
Value: _____
3. Type of personal effect: _____
Description: _____
Value: _____
4. Type of personal effect: _____
Description: _____
Value: _____
5. Type of personal effect: _____
Description: _____
Value: _____
6. Type of personal effect: _____
Description: _____
Value: _____
7. Type of personal effect: _____
Description: _____
Value: _____

Automobiles, Boats, RVS, and Other Vehicles (Please list all vehicles owned by the decedent or jointly owned.)

1. Vehicle type: _____
Make/model/year: _____
Owner's name(s): _____
Value amount: _____
Remaining balance owed: _____
2. Vehicle type: _____
Make/model/year: _____
Owner's name(s): _____
Value amount: _____
Remaining balance owed: _____

3. Vehicle type: _____
Make/model/year: _____
Owner's name(s): _____
Value amount: _____
Remaining balance owed: _____

4. Vehicle type: _____
Make/model/year: _____
Owner's name(s): _____
Value amount: _____
Remaining balance owed: _____

Funds Owed to Decedent (Please list any mortgages, promissory notes, or other funds owed or payable to the decedent.)

1. Debtor's name: _____
Date and type of agreement: _____
Who the funds are owed to: _____
Remaining balance owed: _____

2. Debtor's name: _____
Date and type of agreement: _____
Who the funds are owed to: _____
Remaining balance owed: _____

3. Debtor's name: _____
Date and type of agreement: _____
Who the funds are owed to: _____
Remaining balance owed: _____

4. Debtor's name: _____
Date and type of agreement: _____
Who the funds are owed to: _____
Remaining balance owed: _____

Other Assets (Please include any other asset owned by the decedent, or jointly owned, that does not fit into the categories provided.)

1. Type of asset: _____
Description: _____
Owner's name: _____
Value amount: _____

2. Type of asset: _____
Description: _____
Owner's name: _____
Value amount: _____

3. Type of asset: _____
Description: _____
Owner's name: _____
Value amount: _____

4. Type of asset: _____
Description: _____
Owner's name: _____
Value amount: _____

Decedent's Liabilities (Please list all debts of the decedent and the remaining balances owed.)
Examples include: mortgages, line of credit, property taxes, federal/state/local taxes, housing fees, medical or hospital bills, accountant fees, funeral costs, probate fees, personal/student/other loans, credit card, phone, utilities, or any other expense owed by the decedent to a creditor.

1. Creditor: _____
Amount owed: _____

2. Creditor: _____
Amount owed: _____

3. Creditor: _____
Amount owed: _____

4. Creditor: _____
Amount owed: _____

Who is handling the filing of the decedent's final tax filings?

Additional Information:

Compile the following documents (as applicable and available):

- Certified death certificate
- Original will and any codicils (a codicil is an amendment to the will)
- Memorandum of wishes (this is a list of who the decedent wanted property to go)
- Original trust and any amendments
- Marital agreements / divorce decree / prenuptial agreement
- Bank statements (as of the date of death)
- Agreements related to any of the assets of the decedent
- Deeds, deeds of trust, mortgages, and title Policies for all real estate property
- Business agreements
- Last tax return
- Title to all vehicles
- Insurance policies, annuities, and retirement plans
- Stock and bond certificates
- Safe Deposit box rental agreement and key(s)
- Any statements regarding debts owed (as of date of death)
- Lease agreements
- Unpaid bills
- Bankruptcy filings
- Health insurance
- Probate documents (if you have already started the probate process)
- Computer bookkeeping records, checkbooks, and check registers

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