

PROBATE QUESTIONNAIRE

PLEASE PRINT	DECEASED
FULL NAME	
ALSO KNOWN AS	
DATE OF BIRTH	
SOCIAL SECURITY NUMBER	
RESIDENCE ADDRESS:	
CITY, STATE, ZIP	
COUNTY	
DATE OF DEATH	
CAUSE OF DEATH	

PLEASE PRINT	EXECUTOR / ADMINISTRATOR
FULL NAME	
RESIDENCE ADDRESS:	
CITY, STATE, ZIP	
HOME PHONE	
CELL PHONE	
EMAIL ADDRESS	
RELATIONSHIP TO DECEASED	

NEXT OF KIN DATA

PLEASE LIST NAMES, ADDRESSES, AND RELATIONSHIP OF ALL CHILDREN AND/OR NEXT OF KIN FOR THE DECEASED. PLEASE MARK IF ANY CHILD IS UNDER THE AGE OF 18.

NEXT OF KIN		NEXT OF KIN	
NAME		NAME	
ADDRESS		ADDRESS	
PHONE		PHONE	
RELATIONSHIP		RELATIONSHIP	
NEXT OF KIN		NEXT OF KIN	
NAME		NAME	
ADDRESS		ADDRESS	
PHONE		PHONE	
RELATIONSHIP		RELATIONSHIP	
NEXT OF KIN		NEXT OF KIN	
NAME		NAME	
ADDRESS		ADDRESS	
PHONE		PHONE	
RELATIONSHIP		RELATIONSHIP	
NEXT OF KIN		NEXT OF KIN	
NAME		NAME	
ADDRESS		ADDRESS	
PHONE		PHONE	
RELATIONSHIP		RELATIONSHIP	
NEXT OF KIN		NEXT OF KIN	
NAME		NAME	
ADDRESS		ADDRESS	
PHONE		PHONE	
RELATIONSHIP		RELATIONSHIP	

ASSET INFORMATION

NOTE: PLEASE PROVIDE COPIES OF DEEDS AND/OR ABSTRACTS ON ALL REAL PROPERTY THE DECEASED OWNS, WHETHER IN THE STATE OF OHIO OR OUT OF STATE.

#1	HOME		
HOME ADDRESS		DATE PURCHASED	
NAME(S) ON DEED		NUMBER OF LOTS	
NAME & ADDRESS OF MORTGAGE COMPANY		NUMBER OF ACRES	
LEGAL DESCRIPTION		PURCHASE PRICE	\$
		TODAY'S VALUE	\$
		MORTGAGE BALANCE	\$
		TODAY'S EQUITY	\$
#2	OTHER REAL ESTATE		
PROPERTY ADDRESS		CURRENT TENANTS	
	IS THIS PROPERTY ADJACENT TO THE HOME? YES NO		
NAME(S) ON DEED		RENTAL INCOME	/YR
		TAXES	/YR
		INSURANCE	/YR
		UTILITIES	/YR
		MAINTENANCE	/YR
		OTHER EXPENSES	/YR
LEGAL DESCRIPTION		PURCHASE PRICE	\$
		CAPITAL IMPROVEMENTS	\$
		DEPRECIATION TAKEN	\$
		TODAY'S VALUE	\$
		MORTGAGE BALANCE	\$
		TODAY'S EQUITY	\$
MORTGAGE COMPANY AND ADDRESS		DATE PURCHASED	
		NUMBER OF LOTS/ACRES	

LIFE INSURANCE

PLEASE LIST ALL POLICIES FOR WHICH THE DECEASED IS AN OWNER OR BENEFICIARY OR THE INSURED.

NOTE: IF MORE THAN 3 POLICIES, PLEASE LIST ON SEPARATE SHEET IN THE SAME FORMAT

LIFE INSURANCE POLICY 1

COMPANY		POLICY NO.	
ADDRESS		EFFECTIVE DATE	
PHONE NO.		FACE VALUE	
INSURED		CASH VALUE (the amount you could cash in for)	
OWNER			
BENEFICIARY		CASH VALUE AS OF	
PREMIUM	\$	PER (MO/YR)	LOAN OUTSTANDING

LIFE INSURANCE POLICY 2

COMPANY		POLICY NO.	
ADDRESS		EFFECTIVE DATE	
PHONE NO.		FACE VALUE	
INSURED		CASH VALUE (the amount you could cash in for)	
OWNER			
BENEFICIARY		CASH VALUE AS OF	
PREMIUM	\$	PER (MO/YR)	LOAN OUTSTANDING

LIFE INSURANCE POLICY 3

COMPANY		POLICY NO.	
ADDRESS		EFFECTIVE DATE	
PHONE NO.		FACE VALUE	
INSURED		CASH VALUE (the amount you could cash in for)	
OWNER			
BENEFICIARY		CASH VALUE AS OF	
PREMIUM	\$	PER (MO/YR)	LOAN OUTSTANDING

MINERAL AND ROYALTY INTEREST – PRODUCING AND NON-PRODUCING

NOTE: BRING ALL AVAILABLE INFORMATION ON MINERAL INTERESTS SUCH AS ROYALTY INCOME FROM PRIOR AND CURRENT YEAR, MINERAL DEEDS, DIVISION ORDERS, ETC.

#1			
LEGAL DESCRIPTION		SOURCE ACQUIRED FROM (RESERVED, PURCHASED, OR INHERITED, ETC.)	
PRODUCING	YES NO	DATE ACQUIRED AND FROM WHOM?	
ANNUAL INCOME	\$	VALUE WHEN ACQUIRED	
SOURCE OF INCOME: (OIL, GAS, LEASE, SURFACE DAMAGE, ETC.)		COMPANY NAME AND ADDRESS	
#2			
OTHER REAL ESTATE			
LEGAL DESCRIPTION		SOURCE ACQUIRED FROM (RESERVED, PURCHASED, OR INHERITED, ETC.)	
PRODUCING	YES NO	DATE ACQUIRED AND FROM WHOM?	
ANNUAL INCOME	\$	VALUE WHEN ACQUIRED	
SOURCE OF INCOME: (OIL, GAS, LEASE, SURFACE DAMAGE, ETC.)		COMPANY NAME AND ADDRESS	

IF ADDITIONAL INTERESTS, CONTINUE OF SEPARATE PAGE IN THE SAME FORMAT

DID THE DECEASED HAVE A LIFE ESTATE IN ANY PROPERTY?	
PROPERTY DESCRIPTION	VALUATION OF LIFE ESTATE

ACCOUNTS

(CHECKING, SAVINGS, MONEY MARKET, T-BILL, CD'S, BROKERAGE ACCOUNTS, IRA'S, KEOGH, ANNUITIES, 401(K) PLANS, 403(B) PLANS ETC.)

NOTE: IF MORE THAN 4 ACCOUNTS, PLEASE COPY PAGE & CONTINUE OR LIST ON A SEPARATE SHEET OR ON THE BACK IN THE SAME FORMAT

**** GET COPY OF BANK RECORD FOR ACCOUNT TITLES. DO NOT RELY ON CHECKS, BANK STATEMENTS, ETC.**

ACCOUNT 1		ACCOUNT 2	
TYPE OF ACCOUNT		TYPE OF ACCOUNT	
NAME & ADDRESS OF COMPANY		NAME & ADDRESS OF COMPANY	
ACCOUNT NUMBER		ACCOUNT NUMBER	
CURRENT VALUE	AS OF:	CURRENT VALUE	AS OF:
ANNUAL INTEREST INCOME ON ACCOUNT		ANNUAL INTEREST INCOME ON ACCOUNT	
INTEREST RATE		INTEREST RATE	
MATURITY DATE		MATURITY DATE	
HOW IS IT TITLED? (NAMES)**		HOW IS IT TITLED? (NAMES)**	
OWNER OF ACCOUNT		OWNER OF ACCOUNT	
HOW LONG HAS IT BEEN TITLED THAT WAY?	DATE:	HOW LONG HAS IT BEEN TITLED THAT WAY?	DATE:
ACCOUNT 3		ACCOUNT 4	
TYPE OF ACCOUNT		TYPE OF ACCOUNT	
NAME & ADDRESS OF COMPANY		NAME & ADDRESS OF COMPANY	
ACCOUNT NUMBER		ACCOUNT NUMBER	
CURRENT VALUE	AS OF:	CURRENT VALUE	AS OF:
ANNUAL INTEREST INCOME ON ACCOUNT		ANNUAL INTEREST INCOME ON ACCOUNT	
INTEREST RATE		INTEREST RATE	
MATURITY DATE		MATURITY DATE	
HOW IS IT TITLED? (NAMES)**		HOW IS IT TITLED? (NAMES)**	
OWNER OF ACCOUNT		OWNER OF ACCOUNT	
HOW LONG HAS IT BEEN TITLED THAT WAY?	DATE:	HOW LONG HAS IT BEEN TITLED THAT WAY?	DATE:

STOCKS, BONDS, SAVINGS BONDS

IF STOCKS AND BONDS ARE HELD WITH A BROKER, PLEASE BRING A COPY OF THE MOST CURRENT BROKERAGE STATEMENT. IF NOT HELD WITH A BROKER, PLEASE BRING A COPY OF THE FACE OF THE STOCK(S) AND/OR BOND(S).

STOCK/BOND 1		STOCK/BOND 2	
ASSET TYPE		ASSET TYPE	
NAME & ADDRESS OF COMPANY		NAME & ADDRESS OF COMPANY	
STOCK/BOND #	No. of shares:	STOCK/BOND #	No. of shares:
CURRENT VALUE	AS OF:	CURRENT VALUE	AS OF:
DIVIDEND INCOME	\$ PER YEAR	DIVIDEND INCOME	\$ PER YEAR
MATURITY DATE, IF ANY		MATURITY DATE, IF ANY	
HOW IS IT TITLED? (NAMES)**		HOW IS IT TITLED? (NAMES)**	
HOW LONG HAS IT BEEN TITLED THAT WAY?	DATE:	HOW LONG HAS IT BEEN TITLED THAT WAY?	DATE:
STOCK/BOND 3		STOCK/BOND 4	
ASSET TYPE		ASSET TYPE	
NAME & ADDRESS OF COMPANY		NAME & ADDRESS OF COMPANY	
STOCK/BOND #	No. of shares:	STOCK/BOND #	No. of shares:
CURRENT VALUE	AS OF:	CURRENT VALUE	AS OF:
DIVIDEND INCOME	\$ PER YEAR	DIVIDEND INCOME	\$ PER YEAR
MATURITY DATE, IF ANY		MATURITY DATE, IF ANY	
HOW IS IT TITLED? (NAMES)**		HOW IS IT TITLED? (NAMES)**	
HOW LONG HAS IT BEEN TITLED THAT WAY?	DATE:	HOW LONG HAS IT BEEN TITLED THAT WAY?	DATE:

IF ADDITIONAL STOCK AND/OR BONDS, CONTINUE ON SEPARATE PAGE IN THE SAME FORMAT.

VEHICLES OWNED

CARS, PICKUPS, MOTORCYCLES, BOATS, RV'S, AND/OR OTHER VEHICLES. BRING THE TITLES.

NO. 1		NO. 2	
YEAR		YEAR	
MAKE & MODEL		MAKE & MODEL	
APPROX. MILEAGE		APPROX. MILEAGE	
CONDITION	<input type="checkbox"/> EXCELLENT <input type="checkbox"/> FAIR <input type="checkbox"/> POOR	CONDITION	<input type="checkbox"/> EXCELLENT <input type="checkbox"/> FAIR <input type="checkbox"/> POOR
VALUE	\$	VALUE	\$
AMT. OWED	\$	AMT. OWED	\$
NAME OF MORTGAGE HOLDER		NAME OF MORTGAGE HOLDER	
NAME(S) ON TITLE		NAME(S) ON TITLE	
NO. 3		NO. 4	
YEAR		YEAR	
MAKE & MODEL		MAKE & MODEL	
APPROX. MILEAGE		APPROX. MILEAGE	
CONDITION	<input type="checkbox"/> EXCELLENT <input type="checkbox"/> FAIR <input type="checkbox"/> POOR	CONDITION	<input type="checkbox"/> EXCELLENT <input type="checkbox"/> FAIR <input type="checkbox"/> POOR
VALUE	\$	VALUE	\$
AMT. OWED	\$	AMT. OWED	\$
NAME OF MORTGAGE HOLDER		NAME OF MORTGAGE HOLDER	
NAME(S) ON TITLE		NAME(S) ON TITLE	

IF ADDITIONAL VEHICLES, CONTINUE ON A SEPARATE PAGE IN THE SAME FORMAT.

OTHER ASSETS

LIST ANY OTHER ASSETS (EXAMPLE: LOANS TO FAMILY MEMBERS, ACCOUNTS RECEIVABLE, LIVESTOCK, FARM EQUIPMENT, ETC.)
CURRENT VALUE AND ANNUAL INCOME:

DOES THE DECEASED'S NAME APPEAR ON ANOTHER PERSON'S PROPERTY DEED, CHECKING OR SAVINGS ACCOUNT, CAR TITLE OR OTHER ASSET(S)? IF YES, COMPLETE BELOW:

NO. 1		NO. 2	
ITEM DESCRIPTION		ITEM DESCRIPTION	
EXPLAIN WHY		EXPLAIN WHY	

DID THE DECEASED HAVE A SAFE-DEPOSIT BOX? _____ IF YES, COMPLETE BOXES BELOW.

BOX NO. 1		NO. 2	
BANK AND LOCATION		BANK AND LOCATION	
BOX NUMBER		BOX NUMBER	
CONTENTS		CONTENTS	
WHO ARE THE NAMES ON THE CARD?		WHO ARE THE NAMES ON THE CARD?	

ARE THERE ANY MORTGAGES, LOANS, OR DEBTS THE DECEASED OWED? (NOT PREVIOUSLY MENTIONED) LIST NAME OF INSTITUTION, ADDRESS, AND AMOUNT OWED, ETC. (INCLUDING CREDIT CARDS, STORE CREDITS, FAMILY LOANS, ETC.)

DID THE DECEASED CO-SIGNED ANY LOAN AGREEMENTS FOR ANYONE? _____ IF YES, EXPLAIN BELOW:

IS THERE ANY PENDING LITIGATION FOR/AGAINST THE DECEASED?

DOCUMENTS TO BE COLLECTED

<i>Please provide the following:</i>		CHECK OFF
I. Assets		
	Home: Deed; Mortgage; Fair Market Value. (Provide the county assessor's valuation notice AND tax assessment notice for this property)	
	Other Real Estate: Deed(s); Mortgage; fair market value of any real estate you own other than your home (Provide the county assessor's valuation notice AND tax assessment notice for this property)	
	Minerals: If mineral / royalties are owned on any property on which you do <u>not</u> own the surface interest, you MUST provide a copy of your mineral deed or the probate court order (if inherited) indicating your ownership of the minerals. If you own an interest in a well, please provide a copy of the Assignment.	
	Bank Statements:	
	Brokerage/Mutual Fund Statements: Same as Bank Statements	
	Bond(s): Including U.S. Savings Bonds. If possible, please also provide values of Savings Bonds. To obtain values please visit www.publicdebt.treas.gov/sav/savcalc.htm Click on the "get started" link. In the window that opens, please enter the information requested in each space and click add after each bond is entered. Once all bonds have been entered, please print the values for our records.	
	Stock(s): Certificates and / or brokerage account statements for the past 3 months.	
	IRA(s): Contracts and beneficiary designations	
	Annuity Contract(s): Copy of contract and current surrender value	
	Safe Deposit Box – must be inventories by bank personnel	
	Account(s) Receivable: If you have loaned money to anyone, please provide documentation of the loan and the current outstanding balance. If there is a meeting associated with the loan, please provide a copy.	
	Vehicles: Titles of all vehicles, including boats & motors	
II. EXPENSES		
	Funeral Bill showing all payments	
	Mortgage Payment / Statement showing current balance	
	All debts: Credit card statements, family loans, etc.	
III. Other Documents:		
	Income Tax Return: Copy of the last 3 years returns with supporting schedules and <u>1099s for last year</u> . If Income Tax Returns have not been filed, please provide copies of all 1099s for last year received from all institutions indicating interest, dividends, retirement distributions, income, etc.	
	Death Certificate	
	Will(s)	
	Insurance Policies	
	Trust: All papers relating to any Trust for which the Applicant or Spouse is a Trustor or Beneficiary, Special Needs Trust, Testamentary Trusts and Amendments to Trust.	