

## ASSETS

Describe decedent's property. If known, indicate whether the property is separate property, the surviving spouse's/partner's separate property, or community property. If not, state the name(s) which appear on the title, if known, and state whether the property is held with right of survivorship, if known.

**CASH & ACCOUNTS WITH FINANCIAL INSTITUTIONS:** (include cash, traveler's checks, money orders, and accounts with commercial banks, savings banks, credit unions, etc.)

### CASH

Cash on hand: \_\_\_\_\_

Traveler's checks: \_\_\_\_\_

Money orders: \_\_\_\_\_

### ACCOUNTS

**Name of financial institution:** \_\_\_\_\_

Account title: \_\_\_\_\_

Account number: \_\_\_\_\_

Type of account: (checking/savings/money market/CD/Other \_\_\_\_\_)

Current account balance (as of \_\_\_\_\_): \$ \_\_\_\_\_

**Name of financial institution:** \_\_\_\_\_

Account title: \_\_\_\_\_

Account number: \_\_\_\_\_

Type of account: (checking/savings/money market/CD/Other \_\_\_\_\_)

Current account balance (as of \_\_\_\_\_): \$ \_\_\_\_\_

**Name of financial institution:** \_\_\_\_\_

Account title: \_\_\_\_\_

Account number: \_\_\_\_\_

Type of account: (checking/savings/money market/CD/Other \_\_\_\_\_)

Current account balance (as of \_\_\_\_\_): \$ \_\_\_\_\_

**REAL ESTATE:** (include any real property on which decedent and/or decedent's surviving spouse/partner are an owner, joint owner or have an interest in any manner, including property purchased in recreational developments and time-shares.)

**Street address:** \_\_\_\_\_

State/County of location: \_\_\_\_\_

Legal description (if necessary, attach a copy to this worksheet):

\_\_\_\_\_  
\_\_\_\_\_

Current fair market value (as of \_\_\_\_\_): \$ \_\_\_\_\_  
Name of mortgage company and account number, if any: \_\_\_\_\_

Current balance of mortgage (as of \_\_\_\_\_): \$ \_\_\_\_\_  
Other liens against property: \_\_\_\_\_

Current net equity in property: \$ \_\_\_\_\_

**Street address:** \_\_\_\_\_  
State/County of location: \_\_\_\_\_  
Legal description (if necessary, attach a copy to this worksheet):  
\_\_\_\_\_  
\_\_\_\_\_

Current fair market value (as of \_\_\_\_\_): \$ \_\_\_\_\_  
Name of mortgage company and account number, if any: \_\_\_\_\_

Current balance of mortgage (as of \_\_\_\_\_): \$ \_\_\_\_\_  
Other liens against property: \_\_\_\_\_

Current net equity in property: \$ \_\_\_\_\_

**Street address:** \_\_\_\_\_  
State/County of location: \_\_\_\_\_  
Legal description (if necessary, attach a copy to this worksheet):  
\_\_\_\_\_  
\_\_\_\_\_

Current fair market value (as of \_\_\_\_\_): \$ \_\_\_\_\_  
Name of mortgage company and account number, if any: \_\_\_\_\_

Current balance of mortgage (as of \_\_\_\_\_): \$ \_\_\_\_\_  
Other liens against property: \_\_\_\_\_

Current net equity in property: \$ \_\_\_\_\_

**MINERAL INTERESTS:** (include any property in which the parties own the mineral estate, separate and apart from the surface estate, such as oil and gas leases; also include royalty interests, working interests, and producing and non-producing oil and gas wells)

**Name of mineral interest/lease/well:** \_\_\_\_\_

Type of interest: \_\_\_\_\_

State/County of location: \_\_\_\_\_

Legal description (if necessary, attach a copy to this worksheet):  
\_\_\_\_\_  
\_\_\_\_\_

Name of producer/operator: \_\_\_\_\_

Current value (as of \_\_\_\_\_): \$ \_\_\_\_\_

**Name of mineral interest/lease/well:** \_\_\_\_\_

Type of interest: \_\_\_\_\_

State/County of location: \_\_\_\_\_

Legal description (if necessary, attach a copy to this worksheet):  
\_\_\_\_\_  
\_\_\_\_\_

Name of producer/operator: \_\_\_\_\_

Current value (as of \_\_\_\_\_): \$ \_\_\_\_\_

**BROKERAGE /MUTUAL FUND ACCOUNTS:**

**Name of brokerage firm/mutual fund:** \_\_\_\_\_

Name of account (and subaccounts if any): \_\_\_\_\_  
\_\_\_\_\_

Account Title: \_\_\_\_\_

Account number (and numbers of subaccounts if any): \_\_\_\_\_

Value (as of \_\_\_\_\_)\$ \_\_\_\_\_

**Name of brokerage firm/mutual fund:** \_\_\_\_\_

Name of account (and subaccounts if any): \_\_\_\_\_  
\_\_\_\_\_

Account Title: \_\_\_\_\_

Account number (and numbers of subaccounts if any): \_\_\_\_\_

Value (as of \_\_\_\_\_)\$ \_\_\_\_\_

**Name of brokerage firm/mutual fund:** \_\_\_\_\_

Name of account (and subaccounts if any): \_\_\_\_\_

Account Title: \_\_\_\_\_

Account number (and numbers of subaccounts if any): \_\_\_\_\_

Value (as of \_\_\_\_\_) \$ \_\_\_\_\_

**Name of brokerage firm/mutual fund:** \_\_\_\_\_

Name of account (and subaccounts if any): \_\_\_\_\_

Account Title: \_\_\_\_\_

Account number (and numbers of subaccounts if any): \_\_\_\_\_

Value (as of \_\_\_\_\_) \$ \_\_\_\_\_

**Name of brokerage firm/mutual fund:** \_\_\_\_\_

Name of account (and subaccounts if any): \_\_\_\_\_

Account Title: \_\_\_\_\_

Account number (and numbers of subaccounts if any): \_\_\_\_\_

Value (as of \_\_\_\_\_) \$ \_\_\_\_\_

**STOCKS, BONDS & OTHER SECURITIES:** (include securities not in a brokerage account, mutual fund, or retirement fund)

**Name of security:** \_\_\_\_\_

Number of shares: \_\_\_\_\_

Type: (common stock/preferred stock/bond/other \_\_\_\_\_)

Certificate numbers: \_\_\_\_\_

In possession of: \_\_\_\_\_

Name of exchange on which listed: \_\_\_\_\_

Current market value (as of \_\_\_\_\_): \$ \_\_\_\_\_

**Name of security:** \_\_\_\_\_

Number of shares: \_\_\_\_\_

Type: (common stock/preferred stock/bond/other \_\_\_\_\_)

Certificate numbers: \_\_\_\_\_

In possession of: \_\_\_\_\_

Name of exchange on which listed: \_\_\_\_\_

Current market value (as of \_\_\_\_\_): \$ \_\_\_\_\_

**Name of security:** \_\_\_\_\_

Number of shares: \_\_\_\_\_  
Type: (common stock/preferred stock/bond/other \_\_\_\_\_)  
Certificate numbers: \_\_\_\_\_  
In possession of: \_\_\_\_\_  
Name of exchange on which listed: \_\_\_\_\_  
Current market value (as of \_\_\_\_\_): \$ \_\_\_\_\_

**CLOSELY HELD BUSINESS INTERESTS:** (include sole proprietorships, professional practices, corporations, partnerships, limited liability companies and partnerships, joint ventures, and other nonpublicly traded business entities)

**Name of business:** \_\_\_\_\_  
Address: \_\_\_\_\_  
Type of business organization: \_\_\_\_\_  
Percentage of ownership: \_\_\_\_\_  
Number of shares owned (if applicable): \_\_\_\_\_  
Value (as of \_\_\_\_\_): \$ \_\_\_\_\_

**Name of business:** \_\_\_\_\_  
Address: \_\_\_\_\_  
Type of business organization: \_\_\_\_\_  
Percentage of ownership: \_\_\_\_\_  
Number of shares owned (if applicable): \_\_\_\_\_  
Value (as of \_\_\_\_\_): \$ \_\_\_\_\_

**BUSINESS PERSONAL PROPERTY** (i.e., patents, copyrights, trademarks, and royalties, etc.)

<b>Item Identification</b>	<b>Location</b>	<b>Value</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____

**RETIREMENT BENEFITS:** (including Defined Contribution Plans, Defined Benefit Plans, IRA's, SEP's, KEOGH's, Nonqualified Plans and Government Benefits such as civil service, teacher, railroad, state and local, etc.)

**Name of plan:** \_\_\_\_\_

Name and address of plan administrator: \_\_\_\_\_

Type: (IRA/SEP/KEOGH/DEFINED CONTRIBUTION PLAN/DEFINED BENEFIT PLAN/GOVERNMENT BENEFIT \_\_\_\_\_, OTHER \_\_\_\_\_)

Employee: \_\_\_\_\_

Employer: \_\_\_\_\_

Starting date of creditable service: \_\_\_\_\_ Percent vested: \_\_\_\_\_

Account Title: \_\_\_\_\_

Account number: \_\_\_\_\_

Payee of survivor benefits: \_\_\_\_\_

Designated beneficiary: \_\_\_\_\_

Current account balance (as of \_\_\_\_\_): \$ \_\_\_\_\_

**Name of plan:** \_\_\_\_\_

Name and address of plan administrator: \_\_\_\_\_

Type: (IRA/SEP/KEOGH/DEFINED CONTRIBUTION PLAN/DEFINED BENEFIT PLAN/GOVERNMENT BENEFIT \_\_\_\_\_, OTHER \_\_\_\_\_)

Employee: \_\_\_\_\_

Employer: \_\_\_\_\_

Starting date of creditable service: \_\_\_\_\_ Percent vested: \_\_\_\_\_

Account Title: \_\_\_\_\_

Account number: \_\_\_\_\_

Payee of survivor benefits: \_\_\_\_\_

Designated beneficiary: \_\_\_\_\_

Current account balance (as of \_\_\_\_\_): \$ \_\_\_\_\_

**LIFE INSURANCE:**

**Name of insurance company:** \_\_\_\_\_

Policy number: \_\_\_\_\_

Name of owner: \_\_\_\_\_

Name of insured: \_\_\_\_\_

Designated beneficiary: \_\_\_\_\_

Date of issue: \_\_\_\_\_

Type of insurance: [term/whole/universal] Face amount: \$ \_\_\_\_\_

Amount of premiums [monthly/quarterly/semiannually]: \$ \_\_\_\_\_

Cash surrender value: \$ \_\_\_\_\_

Name of insurance company: \_\_\_\_\_  
Policy number: \_\_\_\_\_  
Name of owner: \_\_\_\_\_  
Name of insured: \_\_\_\_\_  
Designated beneficiary: \_\_\_\_\_  
Date of issue: \_\_\_\_\_  
Type of insurance: [term/whole/universal] Face amount: \$ \_\_\_\_\_  
Amount of premiums [monthly/quarterly/semiannually]: \$ \_\_\_\_\_  
Cash surrender value: \$ \_\_\_\_\_

**ANNUITIES:**

**Name of company:** \_\_\_\_\_  
Policy number: \_\_\_\_\_  
Name of owner: \_\_\_\_\_  
Name of annuitant: \_\_\_\_\_  
Designated beneficiary: \_\_\_\_\_  
Date of issue: \_\_\_\_\_  
Type of annuity: \_\_\_\_\_ Face Amount: \$ \_\_\_\_\_  
Amount of premiums [monthly/quarterly/semiannually]: \$ \_\_\_\_\_  
Current value (as of \_\_\_\_\_): \$ \_\_\_\_\_

**Name of company:** \_\_\_\_\_  
Policy number: \_\_\_\_\_  
Name of owner: \_\_\_\_\_  
Name of annuitant: \_\_\_\_\_  
Designated beneficiary: \_\_\_\_\_  
Date of issue: \_\_\_\_\_  
Type of annuity: \_\_\_\_\_ Face Amount: \$ \_\_\_\_\_  
Amount of premiums [monthly/quarterly/semiannually]: \$ \_\_\_\_\_  
Current value (as of \_\_\_\_\_): \$ \_\_\_\_\_

**MOTOR VEHICLES, BOATS, AIRPLANES, CYCLES, ETC.** (including mobile homes, trailers, and recreational vehicles)

Year: \_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_  
Name on certificate of title: \_\_\_\_\_  
In possession of: \_\_\_\_\_  
Vehicle identification number: \_\_\_\_\_  
Name of creditor if loan against vehicle: \_\_\_\_\_  
Current balance (as of \_\_\_\_\_): \$ \_\_\_\_\_  
Current net equity in vehicle: \$ \_\_\_\_\_

Year: \_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_  
Name on certificate of title: \_\_\_\_\_  
In possession of: \_\_\_\_\_  
Vehicle identification number: \_\_\_\_\_  
Name of creditor if loan against vehicle: \_\_\_\_\_  
Current balance (as of \_\_\_\_\_): \$ \_\_\_\_\_  
Current net equity in vehicle: \$ \_\_\_\_\_

Year: \_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_  
Name on certificate of title: \_\_\_\_\_  
In possession of: \_\_\_\_\_  
Vehicle identification number: \_\_\_\_\_  
Name of creditor if loan against vehicle: \_\_\_\_\_  
Current balance (as of \_\_\_\_\_): \$ \_\_\_\_\_  
Current net equity in vehicle: \$ \_\_\_\_\_

Year: \_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_  
Name on certificate of title: \_\_\_\_\_  
In possession of: \_\_\_\_\_  
Vehicle identification number: \_\_\_\_\_  
Name of creditor if loan against vehicle: \_\_\_\_\_  
Current balance (as of \_\_\_\_\_): \$ \_\_\_\_\_  
Current net equity in vehicle: \$ \_\_\_\_\_

Year: \_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_  
Name on certificate of title: \_\_\_\_\_  
In possession of: \_\_\_\_\_  
Vehicle identification number: \_\_\_\_\_  
Name of creditor if loan against vehicle: \_\_\_\_\_  
Current balance (as of \_\_\_\_\_): \$ \_\_\_\_\_  
Current net equity in vehicle: \$ \_\_\_\_\_



**OTHER MISCELLANEOUS PROPERTY:** (including household furniture, furnishings, and fixtures, electronics and computers, antiques, artwork, collections, sporting goods, firearms, jewelry and other personal items, livestock, etc.)

**Description of Asset:** \_\_\_\_\_  
Owner: \_\_\_\_\_  
Current Value: \$ \_\_\_\_\_

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Owner: \_\_\_\_\_  
Current Value: \$ \_\_\_\_\_

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Owner: \_\_\_\_\_  
Current Value: \$ \_\_\_\_\_

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Owner: \_\_\_\_\_  
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Owner: \_\_\_\_\_  
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Owner: \_\_\_\_\_  
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Owner: \_\_\_\_\_  
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Owner: \_\_\_\_\_  
Current Value: \$ \_\_\_\_\_

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Owner: \_\_\_\_\_  
Current Value: \$ \_\_\_\_\_

**Description of Asset:** \_\_\_\_\_  
Owner: \_\_\_\_\_  
Current Value: \$ \_\_\_\_\_

**SAFE DEPOSIT BOXES:**

**Name of depository:** \_\_\_\_\_

Box number: \_\_\_\_\_

Names of persons with access to contents: \_\_\_\_\_

Items in safe-deposit box: \_\_\_\_\_

**Name of depository:** \_\_\_\_\_

Box number: \_\_\_\_\_

Names of persons with access to contents: \_\_\_\_\_

Items in safe-deposit box: \_\_\_\_\_

**Name of depository:** \_\_\_\_\_

Box number: \_\_\_\_\_

Names of persons with access to contents: \_\_\_\_\_

Items in safe-deposit box: \_\_\_\_\_

**Please provide the following documents**

- \_\_\_\_\_ Vehicle titles (copies)
- \_\_\_\_\_ Copies of any bills and creditors' addresses
- \_\_\_\_\_ Life insurance policies and annuities and summary of current owner and beneficiary provisions
- \_\_\_\_\_ Recent statements for savings account passbooks, statements relating to certificates of deposit, money market certificates, and liquid daily asset accounts
- \_\_\_\_\_ Stockholder or partnership agreements
- \_\_\_\_\_ Leases
- \_\_\_\_\_ Instruments under which client has any interest or power of appointment