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ESTATE/PROBATE DATA
I. DECEDENT

Decedent's full name _____

Other names used _____

Soc. Sec. No. _____ - _____ - _____ Citizenship _____ Sex: M F

Address at time of death:

_____/_____/_____
Street City State Zip County

INCOME TAX RETURN: Year of most recent Income Tax Return _____
Address on return: City _____ County _____ State _____

BIRTH: Date ____/____/_____
City _____ County _____ State _____

DEATH: Date ____/____/_____
Age at death _____
City _____ County _____ State _____
Cause of death _____

LAST ILLNESS: Length of last illness _____

WILL: Does one exist? Yes No If "Yes", please list date of Will _____

COMMUNITY PROPERTY AGREEMENT: Does one exist? Yes No

OCCUPATION _____

Employer's name _____

Address _____

If retired, former Employer _____

Address _____

If self-employed, trade name _____

Address _____

MARITAL STATUS (check one and provide additional information as listed for that section)

Married: Date married ____/____/____ State Decedent resided in when married _____

Widow(er):

Spouse's name _____ His/her date of death _____

Probate Court _____ Cause No. _____

Was there non-probate title clearance with Community Property Agreement? Yes No

Attorney for Personal Representative _____

Dissolution of Marriage: Dissolution date ____/____/____

Former spouse's name _____

Legally separated

Legally separated spouse's name _____

Single

SAFE DEPOSIT BOX

Is there a safe deposit box? Yes No

Location _____
Street City State Zip

Person(s) other than decedent with right of access

Name	Relationship
_____	_____
_____	_____

II. HEIRS

Decedent's Spouse _____ Soc. Sec. No. ____-____-____

Residence address _____
Street City State Zip

Phone numbers: Home (____) _____ Work (____) _____ Cell (____) _____

Business or occupation _____

1. CHILDREN

	Name	Address	Soc. Sec. No.
1.1	_____	_____	_____
1.2	_____	_____	_____
1.3	_____	_____	_____
1.4	_____	_____	_____

2. STEPCHILDREN

	Name	Address	Soc. Sec. No.
2.1	_____	_____	_____

2.2	_____	_____	_____

2.3	_____	_____	_____

3. DECEASED CHILDREN

	Name	Date of death	Soc. Sec. No.
3.1	_____	_____	_____
3.2	_____	_____	_____

4. ISSUE OF DECEASED CHILD

	Name	Address	Soc. Sec. No.
4.1	_____	_____	_____

4.2	_____	_____	_____

4.3	_____	_____	_____

4.4	_____	_____	_____

5. OTHER HEIRS

	Name	Address	Soc. Sec. No.
5.1	_____	_____	_____

5.2	_____	_____	_____

5.3	_____	_____	_____

5.4	_____	_____	_____

6. DISTRIBUTEES OTHER THAN HEIRS

	Name	Address	Soc. Sec. No.
6.1	_____	_____	_____

6.2	_____	_____	_____

6.3	_____	_____	_____

6.4	_____	_____	_____

7. HEIRS OR DISTRIBUTEES DISCLAIMING INTERESTS

	Name	Address	Nature of Interest Disclaimed
7.1	_____	_____	_____

7.2	_____	_____	_____

III. ASSETS

A. REAL ESTATE (* Papers and documents to be delivered to lawyer's office)

- | | |
|-----------------------------|------------------------|
| * Deeds | * Appraisals |
| * Title insurance policy | * Mortgages |
| * Fire insurance policy | * Real estate contract |
| * Most recent tax statement | |

1. Residence:

1.1 Legal description: (can attach a copy of legal description)

1.2 Estimated Value \$ _____

1.3 Assessed Value \$ _____

1.4 Parcel number _____

1.5 Indebtedness Against _____

1.6 Who Owed _____

1.7 Title Holder _____

2. Other real property:

2.1 Legal description: (can attach a copy of legal description)

2.2 Estimated Value \$ _____

2.3 Assessed Value \$ _____

2.4 Parcel number _____

2.5 Indebtedness Against _____

2.6 Who Owed _____

2.7 Title Holder _____

3. Out-of-State Real Estate:

3.1 Legal description: (can attach a copy of legal description)

3.2 Estimated Value \$ _____

3.3 Assessed Value \$ _____

3.4 Parcel number _____

3.5 Indebtedness Against _____

3.6 Who Owed _____

3.7 Title Holder _____

B. **STOCKS** (Stock certificates or statements furnishing name, number of shares and type of stock)

1.1 Name of Company _____

1.2 Name in which Registered _____

1.3 No. of Shares: _____ 1.4 Value per share on date of decedent's death \$ _____

2.1 Name of Company _____

2.2 Name in which Registered _____

2.3 No. of Shares: _____ 2.4 Value per share on date of decedent's death \$ _____

3.1 Name of Company _____

3.2 Name in which Registered _____

3.3 No. of Shares: _____ 3.4 Value per share on date of decedent's death \$ _____

4.1 Name of Company _____

4.2 Name in which Registered _____

4.3 No. of Shares: _____ 4.4 Value per share on date of decedent's death \$ _____

C. **BONDS** (Bonds or statements furnishing name, face amount, due date and interest payment dates)

1.1 Name of Company/Issuer: _____

1.2 Face Amount \$ _____ 1.3 Interest Rate _____ 1.4 Due Date _____

1.5 Description _____

2.1 Name of Company/Issuer: _____

2.2 Face Amount \$ _____ 2.3 Interest Rate _____ 2.4 Due Date _____

2.5 Description _____

3.1 Name of Company/Issuer: _____

3.2 Face Amount \$ _____ 3.3 Interest Rate _____ 3.4 Due Date _____

3.5 Description _____

4.1 Name of Company/Issuer: _____

4.2 Face Amount \$ _____ 4.3 Interest Rate _____ 4.4 Due Date _____

5.5 Description _____

5.1 Name of Company/Issuer: _____

5.2 Face Amount \$ _____ 5.3 Interest Rate _____ 5.4 Due Date _____

5.5 Description _____

D. **MORTGAGES AND NOTES**

- Please provide a copy of:
- * Mortgages payable to decedent
 - * Notes payable to decedent
 - * Real estate contracts payable to decedent

E. **CASH IN BANKS, SAVINGS & LOAN ASSOCIATIONS AND OTHER FINANCIAL ORGANIZATIONS**

- Please provide a copy of:
- * Most recent statement for all checking accounts
 - * Savings account passbook
 - * Certificates of deposit, or statement with number, denomination & location

For each account, please list: (up to 5 accounts can be listed here, for additional accounts please use separate page)

1.1 Bank/Assn. name _____

1.2 Branch _____

1.3 Type of Account Checking Savings CD Other _____

1.4 Account No: _____

1.5 In the name of: _____

1.6 With or Without Right of Survivorship

1.7 Balance on date of death \$ _____

1.8 Interest accrued through date of death \$ _____

2.1 Bank/Assn. name _____
2.2 Branch _____
2.3 Type of Account Checking Savings CD Other _____
2.4 Account No: _____
2.5 In the name of: _____
2.6 With or Without Right of Survivorship
2.7 Balance on date of death \$ _____
2.8 Interest accrued up to date of death \$ _____

3.1 Bank/Assn. name _____
3.2 Branch _____
3.3 Type of Account Checking Savings CD Other _____
3.4 Account No: _____
3.5 In the name of: _____
3.6 With or Without Right of Survivorship
3.7 Balance on date of death \$ _____
3.8 Interest accrued up to date of death \$ _____

4.1 Bank/Assn. name _____
4.2 Branch _____
4.3 Type of Account Checking Savings CD Other _____
4.4 Account No: _____
4.5 In the name of: _____
4.6 With or Without Right of Survivorship
4.7 Balance on date of death \$ _____
4.8 Interest accrued up to date of death \$ _____

5.1 Bank/Assn. name _____
5.2 Branch _____
5.3 Type of Account Checking Savings CD Other _____
5.4 Account No: _____
5.5 In the name of: _____
5.6 With or Without Right of Survivorship
5.7 Balance on date of death \$ _____
5.8 Interest accrued up to date of death \$ _____

F. CASH IN POSSESSION

1.1 Cash in home \$ _____ 1.3 Cash in safe deposit box \$ _____
1.2 Cash on person \$ _____ 1.4 Uncashed checks \$ _____

G. INSURANCE

Please provide a copy of all policies of insurance on decedent's life and on surviving spouse's life.

H. MISCELLANEOUS PROPERTY (List separately articles having value in excess of \$3,000.)

1.1 Personal Effects

_____ \$ _____
_____ \$ _____

1.2 Furniture and Household Goods

_____ \$ _____
_____ \$ _____
_____ \$ _____

1.3 Please provide a copy of all motor vehicle title certificates

1.4 Other (jewelry, furs, antiques, objects of art, boats, sporting equipment, refunds, claims, debts due decedent, death benefits, etc.)

_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____

1.5 Employee Benefits

Unpaid salary and vacation pay \$ _____

Pension Plan _____

Profit-sharing Plan _____

1.6 Business interests and partnerships - name and address

1.7 Accounts Receivable

Name and Address of Debtor Amount Due

(a) _____ \$ _____

(b) _____ \$ _____

1.8 Trusts in which decedent had an interest:

Name of Trust _____

Address _____

I. TRANSFERS OF PROPERTY WITHIN 3 YEARS OF DEATH

	Description	Transferee	Date
1.1	_____	_____	_____
1.2	_____	_____	_____
1.3	_____	_____	_____

* Please provide a copy of all gift tax returns

J. ANNUITIES

	Name & Address of Payor	Contract No.
1.1	_____	_____
	_____	_____
1.2	_____	_____
	_____	_____

IV. DEBTS

A. FUNERAL EXPENSES

1.1	Funeral director _____	\$ _____
1.2	Cemetery _____	\$ _____
1.3	Monument _____	\$ _____
1.4	Floral _____	\$ _____
1.5	Other _____	\$ _____

B. NOTES PAYABLE (list each Payor)

1.1	Name _____	\$ _____
	Address _____	
1.2	Name _____	\$ _____
	Address _____	

C. ACCOUNTS PAYABLE (list each Creditor)

1.1	Name _____	\$ _____
	Address _____	
1.2	Name _____	\$ _____
	Address _____	

* Please provide a copy of the most recent Financial Statements

* Please provide a copy of Income tax returns for past 3 years

VI. FEES

A. ATTORNEY FEES

Estimated Fee \$ _____ Estimated length of probate proceedings: _____ months

Billing Schedule: _____

B. PERSONAL REPRESENTATIVE FEES

Will Personal Representative claim a fee? Yes No

If "Yes", are time records to be kept? Yes No

Estimated fee \$ _____

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