ESTATE ORGANIZER

the preparation of v	arious documents requir	, ,	the Estate of	
•			ions regarding any items please do not hesitate	
to contact us.		DECEDENT		
		DECEDENT		
Full Name:				
			Date of death:	
Occupation (former o	ccupation if retired):			
Legal residence at date	e of death (city, county, stat	e and ZIP):		
			Date domicile established:	
		SPOUSE		
Full Name:				
Divorced		Provide copy of Div		
Deceased	Date of Death:	Provide copy of dea	th certificate	
		FIDUCIARY		
Full Name:				
Address:				
		SSN/EIN:		
Phone:		Fax:		
		ADVISORS		
Accountant's name, ac	ddress and telephone numb	er		
Investment Advisor's r	name, address and telephor	ne number:		

DISTRIBUTEES

Name	Address	Relationship to Decedent	SSN	Date of Birth

BENEFICIARIES

Address	Relationship to Decedent	SSN/EIN	Date of Birth
	Address		

DOCUMENTS/INFORMATION TO PROVIDE

(only photocopies are needed unless original document specified)

☐ Original Last Will & Testament and any Codicils
☐ Original Trust(s)
☐ Gift Tax Returns
☐ Last three years' tax returns (personal/1040 and any Trust returns/1041)
☐ Prenuptial/Postnuptial Agreements
☐ Business Agreement and business appraisal
☐ Title to vehicles
☐ Stock certificates
☐ Savings bonds
☐ Death certificates for pre-deceased distributees
☐ Statements for all accounts, IRAs, CDs, etc (whether held individually or jointly with others)
☐ Joint asset holder information (name, address and telephone number)
☐ Real property: ☐ Deed ☐ Title report ☐ Appraisal ☐ Tax bill ☐ Rental information
☐ Notes and Mortgages
☐ Annuities and retirement benefits (include beneficiary designations)
☐ Life insurance policy(s) and beneficiary designations for same
☐ Safe deposit box information (location, name of any joint owner, list of contents)
☐ Estate tax return for predeceased spouse
☐ Power-of-Attorney
□ Employment benefit agreements
☐ Details of expected inheritance
☐ Details of litigation
☐ Tangible personal property and/or collections information (provide list with appraisals, if any)
Expenses (provide copy of statements/receipts for funeral, memorial reception, clergy, flowers, accountant, etc.)
Dehts (provide conv of statements/receipts for credit cards utilities. Notes, etc.)

NOTES

(Please provide an	v additional in	formation.	auestions	, comments or concerns	;)
i icase provide an	y additional in	pormacion,	questions	, committeenes of confecting	•