PLEASE BRING THE FOLLOWING WITH YOU TO YOUR APPOINTMENT (IF APPLICABLE)

PROBATE CHECKLIST

	Original Will and Codicil (if any).		
	Copies of Trusts (if any).		
	Death Certificate.		
	Copy of paid funeral bill.		
	Deeds for Real Estate.		
	Title to any motor vehicles, boats, trailers.		
	Names, social security numbers and addr will and their relationship to the deceased minors listed.		
	Family Tree (names and address of next of)	kin).	
	Any Safe Deposit Information.		
	Form 712 Life Insurance Statement (if Life	Insurance has a	already been claimed)
	QUESTIONS		
Did the deced Location, Nan	ent have a safe deposit box ne on Box	YES	NO
Did the decedent make gifts or transfers within the last five (5) years		YES	NO
	ent own valuable antiques, oins or stamp collections	YES	NO
	ng spouse a U.S. Citizen, naturalization), and of spouse	YES	NO

PLEASE COMPLETE THE ATTACHED LIST AND BRING IT TO YOUR APPOINTMENT

ASSET INFORMATION

Location	Rental Income
Name(s) on Deed	
Mortgage/Name(s) on Mortgage	Balance/Bank/Acct. #
Location	Rental Income
Name(s) on Deed	
Mortgage/Name(s) on Mortgage	Balance/Bank/Acct. #
BROKERAGE ACCOUNTS, BONDS, a	and SECURITIES
Brokerage A	Accounts.
	recounts.
Financial Institution	Name(s) on Account
Financial Institution Account #	
	Name(s) on Account
	Name(s) on Account

Brokerage Accounts Con't

Financial Institution	1	Name(s) on Account	
Account #		DOD Value	
	Bonds:		
# of Bonds and Series (E, EE, H)		Name(s) on Bond	
Issue Date		Face Amount	
# of Bonds and Series (E, I	EE, H)	Name(s) on Bond	
Issue Date		Face Amount	
Securitie Name of Stock	s/Stock (Not in Brokerag	e Account)	
Name of Stock	# of Shares	Name(s) on Stock	
Transfer Agent	# of Shares Account #	Name(s) on Stock Dividends reinvested	
Transfer Agent Name of Stock	Account #	Dividends reinvested	
Transfer Agent	Account # # of Shares	Dividends reinvested Name(s) on Stock	

C. **BANK ACCOUNTS** 1. Financial Institution Name(s) on Account DOD Value Account # 2. Financial Institution Name(s) on Account Account # DOD Value 3. Financial Institution Name(s) on Account DOD Value Account # D. **AUTOMOBILE(S), BOAT(S), TRAILER(S):** 1. Year, Make & Model Name(s) on Title VIN Number 2. Year, Make & Model Name(s) on Title

VIN Number

E. ANNUNITIES, IRAS, & PENSIONS

Annuities

Company	Account/Policy Number
Beneficiary	DOD Value/Benefit
Company	Account/Policy Number
Beneficiary	DOD Value/Benefit
Company	Account/Policy Number
Beneficiary	DOD Value/Benefit
IRA'S/Pension	Benefits
Bank/Financial Institution	Account Number
Beneficiary	DOD Value/Benefit
Bank/Financial Institution	Account Number
Beneficiary	DOD Value/Benefit
Bank/Financial Institution	Account Number
Beneficiary	DOD Value/Benefit

IRA's/Pension Benefits Con't

Bank/Financial Institution	Account Number
Beneficiary	DOD Value/Benefit
LIFE INSURANCE POLICIES	
Company	Policy Number
Beneficiary	DOD Value/Benefit
Company	Policy Number
Beneficiary	DOD Value/Benefit
Company	Policy Number
Beneficiary	DOD Value/Benefit
Company	Policy Number
Beneficiary	DOD Value/Benefit