

**Instructions:**

- Please legibly fill in the requested information.
- If you are unsure of a question, simply leave the answer blank.
- Please list **all** heirs and devisees, even if they are now deceased.

**DECEDENT'S INFORMATION**

Full name: \_\_\_\_\_

Birth date: \_\_\_\_\_ Date of Death: \_\_\_\_\_ Age at Death: \_\_\_\_\_

SSN: \_\_\_\_\_ (please format dates as mm/dd/yyyy)

Residence address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Place of Death: \_\_\_\_\_

County: \_\_\_\_\_ (for example: Portland, Multnomah County, Oregon)

Decedent had a Will?  Yes  No

(If the Decedent did have a Will, please provide our office a copy)

Was Decedent on Medicaid?  Yes  No

How are you related to the Decedent? \_\_\_\_\_

Please tell us about the Decedent.

Please let us know of any special concerns you may have regarding the Decedent's estate.

**YOUR INFORMATION (PROPOSED PERSONAL REPRESENTATIVE)**

Full name: \_\_\_\_\_

Birth date: \_\_\_\_\_ SSN: \_\_\_\_\_ (needed to obtain estate tax ID #)

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Mailing address: \_\_\_\_\_

(if different than your street address)

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

*Can we leave confidential messages at the above phone numbers?*

Yes  No

Email: \_\_\_\_\_

Have you been convicted of any Felony?  Yes  No

Have you been convicted of any Misdemeanor?  Yes  No

**Why am I being asked these questions?**

If probate is needed, Oregon Statute requires that we must inform the court that you are not disqualified from serving as Personal Representative.

**What is a bond? Will I need to be bonded?**

Sometimes the Probate Court requires that the Personal Representative be bonded. A Bond is essentially an insurance policy that ensures the wishes of the Decedent are carried out ethically and honest. In cases of fraud, the Bond will reimburse those affected, including heirs of the estate or creditors of the estate. If the Decedent left a Will, the Will may waive the requirement of bond.

Are you a US Citizen? Yes      No

Did the Decedent own or operate a business that you intend to continue as fiduciary? Yes      No

Are you indebted to the Decedent? Yes      No

To the best of your knowledge, is the estate insolvent? Yes      No

Are there any disputes among the heirs that you are aware of? Yes      No

Have you ever filed for bankruptcy? If so, Yes      No  
which year: \_\_\_\_\_

**DECEDENT'S HEIRS**

(Children either born or adopted; include descendants of any deceased child of the decedent)

FULL NAME	RELATIONSHIP TO DECEDENT	MAILING ADDRESS, EMAIL ADDRESS, AND PHONE NUMBER	DATE OF BIRTH IF A MINOR

**DECEDENT'S DEVISEES**

(If decedent did not have a Will, this section does not apply. List beneficiaries named in a Will – they may be identical to heirs listed above)

FULL NAME	RELATIONSHIP TO DECEDENT	MAILING ADDRESS, EMAIL ADDRESS, AND PHONE NUMBER	DATE OF BIRTH IF A MINOR

**DECEDENT’S ASSETS SUBJECT TO PROBATE IN OREGON:**

(If you don’t have an exact value, an estimate is fine; assets subject to probate are those that list the decedent as owner or possibly co-owner)

<b>Bank Accounts</b>	
BANK NAME AND ACCOUNT NUMBER	VALUE AS OF DATE OF DEATH

<b>Investment Accounts</b>	
INVESTMENT FIRM AND ACCOUNT NUMBER	VALUE AS OF DATE OF DEATH

<b>Real Property</b>	
ADDRESS	VALUE AS OF DATE OF DEATH

<b>Vehicles</b>	
MAKE, MODEL, AND YEAR	VALUE AS OF DATE OF DEATH

<b>Miscellaneous</b>	
DESCRIPTION OF ASSET	VALUE AS OF DATE OF DEATH

<b>Personal Property</b>	
	VALUE AS OF DATE OF DEATH

**DECEDENT'S NON-PROBATE ASSETS:**

(Please list any assets decedent had a beneficiary designation or transfer-on-death beneficiary listed and/or any assets that were co-owned and transferred at death with rights of survivorship)

	<b>Bank Accounts</b>
<b>BANK NAME AND ACCOUNT NUMBER</b>	<b>VALUE AS OF DATE OF DEATH</b>

	<b>Investment Accounts</b>
<b>INVESTMENT FIRM AND ACCOUNT NUMBER</b>	<b>VALUE AS OF DATE OF DEATH</b>

	<b>Real Property</b>
<b>ADDRESS</b>	<b>VALUE AS OF DATE OF DEATH</b>

	<b>Vehicles</b>
<b>MAKE, MODEL, AND YEAR</b>	<b>VALUE AS OF DATE OF DEATH</b>

	<b>Miscellaneous</b>
<b>DESCRIPTION OF ASSET</b>	<b>VALUE AS OF DATE OF DEATH</b>

	<b>Personal Property</b>
	<b>VALUE AS OF DATE OF DEATH</b>

**DECEDENT'S DEBTS OR KNOWN CREDITORS:**

(A debt may be a mortgage, credit card account, loan, etc.; a creditor is a person or company who is owed money)

CREDITOR NAME AND ADDRESS	ACCOUNT NUMBER	AMOUNT OWED (\$)

**Please send us originals of the following documents (if available):**

- Death Certificate
- Last Will and Testament (if decedent had one) with Witness Affidavit

**Please send us copies of the following documents (if available):**

- Investment/Financial Statements (from date of death through today)
- Utility Statements (electric, gas, water, etc.)
- Loan and Creditor Statements (from date of death through today)
- Deeds to real property

**IF ENGAGED, THIS FORM MAY BE PROVIDED TO THE ESTATE'S CPA.**