

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	le: 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	
Did the Decedent own firearms?	□ Yes □ No Are	the firearms secured? \square Yes \square No
How are you related to the Decede	ent?	
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 th	an your street address)			
City:		State:	Zip (code:
Home phone:		Cell phone: _		
	eave confidential messag □ Yes	□ No	phone numbers?	
		Voc. D No.	77/1 T1 ·	1.14 4 0
Have you been convicted of	any relony.	Yes □ No	Why am I being	asked these questions?
Have you been convicted of	f any Misdemeanor?	Yes □ No	requires that we n	needed, Oregon Statute must inform the court that ualified from serving as atative.
What is a bond? Will I need	to be bonded?			
Sometimes the Probate Court Representative be bonded. A insurance policy that ensures the carried out ethically and honest will reimburse those affected, or creditors of the estate. If the Will may waive the requirement	A Bond is essentially an le wishes of the Decedent are. In cases of fraud, the Bond including heirs of the estate he Decedent left a Will, the			
Are you a US Citizen?			Yes	No
Did the Decedent own or continue as fiduciary?	operate a business that yo	ou intend to	Yes	No
Are you indebted to the Do	ecedent?		Yes	No
To the best of your knowled	edge, is the estate insolve	ent?	Yes	No
Are there any disputes amo	ong the heirs that you are	e aware of?	Yes	No
Have you ever filed for ba	nkruptcy? If so, which year:		Yes	No



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)

	Bank Accounts
DANKALANG AND AGGOLINGARILIMED	VALUE AS OF DATE OF DEATH
BANK NAME AND ACCOUNT NUMBER	VALUE AS OF DATE OF DEATH
	Investment Accounts
INVESTMENT FIRM AND ACCOUNT NUMBER	VALUE AS OF DATE OF DEATH
	Real Property
ADDRESS	VALUE AS OF DATE OF DEATH
	Vehicles
Marin Marin and Marin	
MAKE, MODEL, AND YEAR	VALUE AS OF DATE OF DEATH
	Miscellaneous/Firearms
DESCRIPTION OF ASSET	VALUE AS OF DATE OF DEATH
DESCRIPTION OF THOSE	THE STEET OF PERSON
	Personal Property
	VALUE AS OF DATE OF DEATH

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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)

	Bank Accounts
BANK NAME AND ACCOUNT NUMBER	VALUE AS OF DATE OF DEATH
Y	Investment Accounts
INVESTMENT FIRM AND ACCOUNT NUMBER	VALUE AS OF DATE OF DEATH
	Real Property
Address	VALUE AS OF DATE OF DEATH
T D D T COO	THE DIE OF BRIDGE
	Vehicles
Make, Model, and Year	Value AS OF DATE OF DEATH
WAKE, WODEL, AND TEAK	VALUE AS OF DATE OF DEATH
	I
	Miscellaneous/Firearms
DESCRIPTION OF ASSET	VALUE AS OF DATE OF DEATH
	Personal Property
	VALUE AS OF DATE OF DEATH



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)

G 17	1 37	
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.