



BLAKE & PULSIFER™ PLC

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PROBATE/TRUST ADMINISTRATION WORKSHEET

Date: _____

Referred by: _____

Email: _____

I. DECEDENT'S AND FAMILY INFORMATION:

Decedent's Information

Name: _____

Street Address (as of date of death): _____

City, State & Zip: _____

Date of Birth: _____ Date of Death: _____

Place of Death: _____ S/S Number: _____

U.S. Citizen ☐ Yes ☐ No (if no, state citizenship _____)

Decedent's Spouse

Name: _____

Address: _____ City, State & Zip: _____

Date of Birth: _____ Date of Death: _____

S/S Number: _____ Email: _____

U.S. Citizen ☐ Yes ☐ No (if no, state citizenship _____)

Common Children of Decedent and Spouse (attach additional sheets as necessary)

Name: _____ Age: _____

Address: _____ City, State & Zip: _____

S/S Number: _____ Date of Death: _____

Name: _____ Age: _____

Address: _____ City, State & Zip: _____

S/S Number: _____ Date of Death: _____

Name: _____ Age: _____

Address: _____ City, State & Zip: _____

S/S Number: _____ Date of Death: _____

Common Children of Decedent and Spouse (continued)

Name: _____	Age: _____
Address: _____	City, State & Zip: _____
S/S Number: _____	Date of Death: _____

Decedent's Children from Prior Marriage(s) (attach additional sheets as necessary)	
Name: _____	Age: _____
Address: _____	City, State & Zip: _____
S/S Number: _____	Date of Death: _____
Name: _____	Age: _____
Address: _____	City, State & Zip: _____
S/S Number: _____	Date of Death: _____
Name: _____	Age: _____
Address: _____	City, State & Zip: _____
S/S Number: _____	Date of Death: _____

II. ESTATE PLANNING DOCUMENTS¹

Please bring in all estate planning documents executed by the decedent.

Trust
Name of Trust: _____ Successor Trustee information: Name: _____ Address: _____ City, State & Zip: _____ Telephone No.: _____ Email: _____ S/S Number: _____ U.S. Citizen ☐ Yes ☐ No (if no, state citizenship _____)

Will
Personal Representative information: Name: _____ Address: _____ City, State & Zip: _____ Telephone No.: _____ Email: _____ S/S Number: _____ U.S. Citizen ☐ Yes ☐ No (if no, state citizenship _____) Relationship to Decedent: _____ Race: _____ Height: _____ Weight: _____ Eye Color: _____ Hair Color: _____ (needed for probate court application)

¹ Attach copies of all estate planning documents; Provide original Will and Codicils if probate will be filed

III. DECEDENT’S ASSETS:

A. Real Estate² (homes, vacation properties, land, farms, deeds of trust, etc.)

Property Address or Location	Owner(s) and Title (e.g. T/C ³ , JTWROS ⁴ , CPWROS ⁵ , Separate Property, or Other)	Market Value	Mortgages/ Liens	Net Value

B. Life Insurance and Non-Qualified Annuities⁶

Insurer/ Company	Death Benefit	Type of Annuity/Life Insurance(term, whole, universal, etc.)	Owner/ Insured	Beneficiary

² Attach deeds, if available.

³ “T/C” means Tenants in Common.

⁴ “JTWROS” means Joint Tenancy with Right of Survivorship.

⁵ “CPWROS” means Community Property with Right of Survivorship.

⁶ Attach most recent statements and policies, if available.

C. Qualified Retirement Plans/IRAs⁷ (IRA's, 401k's, other tax deferred retirement accounts)

Financial Institution	Type	Owner	Value	Current Beneficiary

D. Checking, Savings, CDs & Investments⁸ (Investment Portfolio, Mutual Funds and Other After-Tax Accounts)

Name of Bank or Financial Institution	Type of Account	Owner(s) and Title (Joint, sole, joint with third party)	Value	Beneficiaries or POD/TOD's (if any)

⁷ Attach most recent statements, if available

⁸ Attach most recent statements

E. Business Interests⁹ (partnerships, LLC's, corporations, and other business interests)

Name of Business	Type (C-Corp, S-Corp, LLC, etc.)	Owner(s) and Title	Percent Owned	Value of Interest Owned

F. Automobiles, Motorcycles, Boats, Aircraft, and RVs¹⁰

Description	Title	Value	Encumbrance

⁹ Attach copies of controlling documents (i.e., Articles, Operating Agreement, Bylaws, Partnership Agreement, Buy/Sell Agreements, etc.)

¹⁰ Attach titles, if available

G. Collectibles & Heirlooms (Art, Goldware, Antiques, Memorabilia, etc. Having Significant Value to a Third Party; Personal Property Having Sentimental or Historical Significance - With or Without Value)

Description	Value

H. Intangible Personal Property¹¹ (promissory notes, stocks and bonds in certificate form, contracts, cash, etc.)

Description	Owner(s) and Title	Value

I. Gifts to Beneficiaries if such gifts were subject to gift tax.¹²

Gift Made To	Give Made By	Description of Gifted Property	Reason for Gift Description	Date	Value/ Amount

¹¹ Attach copies if available.

¹² Attach copy of Gift Tax Return

IV. DEBTS OF DECEDENT¹³ Bring in any bills received.

Creditor Name:	Account Number:	Dollar Amount:

V. DECEDENT’S ADVISORS/PROFESSIONALS

Name	Type of Advisor (Accountant, Banker, etc.)	Email Address	Phone Number

VI. MISCELLANEOUS

Income Tax Returns¹⁴
Year last income tax return filed: _____
Was Decedent making quarterly estimated tax payments: ☐ Yes ☐ No
If making quarterly tax payments – provide date of payments and amounts: _____

Was Prior Year’s Tax Refund Applied to Current Tax Year: ☐ Yes ☐ No
If Yes – provide amount applied: _____

¹³ Attach copies of most recent bills/statements if available

¹⁴ Attach copies of last three years income tax returns

Blake & Pulsifer, PLC – Probate/Trust Administration Worksheet

VII. OTHER QUESTIONS OR CONCERNS: