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FORM 1	PROBATE INFORMATION LIST
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Please obtain as many of the following described items and as much of this requested information as possible. If an item definitely applies to this estate and you have obtained all documents and/or have furnished all information requested, so indicate by a check mark. Do not be surprised if you cannot complete all items.

PLEASE LET US COLLECT ALL LIFE INSURANCE* AND EMPLOYEE BENEFITS SINCE IT IS MANDATORY FOR US TO OBTAIN CERTAIN INFORMATION DIRECTLY FROM THE COMPANIES. IT WILL ALSO MAKE OUR JOB EASIER IF YOU WILL NOT PAY ANY OF DECEDENT'S BILLS *BEFORE OUR FIRST APPOINTMENT*.

Please assemble the items in the order below, fill in the answers to the questions and bring this list and the assembled materials to my office. When you have as much as you can furnish, please call my secretary to make an appointment.

PROBATE INFORMATION LIST

Full Name of Decedent (D) _____

Date of Death _____

Information to be completed:

CHECK WHEN
COMPLETED

- _____ 1. Date and place of D's birth _____
D's residence address at time of death _____

Approximate date on which D became a Texas resident _____
If D and D's surviving spouse had not resided in Texas during the entirety of their marriage, list all places of residence and approximate dates _____

D's citizenship if not U.S. _____
D's Social Security number _____
D's Medicare number _____
D's Military Identification number _____
D's VA Identification number _____
Dates and branch of D's military service _____

D's occupation at the date of death and the name, address and phone number of employer and of person to Contact concerning benefits _____

If D was self-employed, list D's trade name, business address, and employer identification number of D's Business _____

If retired, give D's former occupation, employer, and nature of business _____

_____ 2. Club, fraternal and lodge memberships of D or D's spouse (1.0) _____

_____ 3. Length of D's last illness _____
Names and addresses of all hospitals in which D was confined in the last three years and dates of confinement (1.0) _____

_____ 4. Names and addresses of D's personal physician and of physicians and nurses attending D during D's last illness (1.0) _____

_____ 5. Names and addresses and phone numbers of the witnesses to D's most recent will and all codicils (2.0) _____

Name, address and phone number of each executor, trustee and guardian (including alternates) named in D's will (2.0) _____

_____ 6. If D was not survived by either spouse or children, or if D's will provides benefits to institutions or to persons other than the surviving spouse and children, please furnish name, address, phone number, date of birth, Social Security number, marital status and name of that person's spouse, and relationship to D for each of those institutions or persons and also for D's surviving parents (3.0) _____

_____ 7. Date and place of marriage to and name, address, phone number, date of birth, Social Security number, citizenship, and current income tax bracket of D's surviving spouse (3.0) _____

Same information with respect to all D's prior spouses, especially dates and places of those marriages and of termination of prior marriages and whether terminated by death or divorce (3.0) _____

_____ 8. Name, address, phone number, date of birth, Social Security number, current income tax bracket, marital status and name of spouse of all children ever born to or adopted by D, whether presently living or not, and identify the other parent. If D was not survived by either a spouse or children, check here _____ (3.0) _____

_____ 9. Name and address of each bank where D maintained or had access to or kept items in a safe deposit box, the box number(s), and the name, address and relationship of all other persons having access to those boxes (4.0) _____

_____ 10. Name, address and phone number of D's personal secretaries, attorneys, accountants, tax return preparers, stockbrokers, life insurance agents, casualty insurance agents, health and accident insurance agents, bankers, and other professional advisors (5.0; 9.0; 13.0; 14.0; 15.0) _____

_____ 11. Description of any improvements to real estate (7.0) _____

_____ 12. Style of account, account number and name and location of bank, savings association, and credit union for each checking or savings account or certificate of deposit in the name of D or D's spouse or on which D could sign, and name of officer, if known (11.0) _____

_____ 13. Detailed description of all motor vehicles including make, model, year, body type, mileage, and major equipment such as air conditioning, automatic transmission, power equipment, sun roof, stereo, tape deck, CB, etc. (17.0) _____

_____ 14. General description of all other property owned by D or D's spouse, including livestock, farm products, leasehold interests, jewelry, household goods and personal effects. With respect to jewelry, household goods, and personal effects, itemize only those items of considerable value (\$1,000.00 or more). Bring as much additional information as you can locate, including financial statements, related to these items (18.0) _____

_____ 15. List outstanding accounts, charge or credit card purchases (including account numbers) made but not yet billed, and other debts and charitable pledges owed by D or D's spouse on the date of D's death and names, addresses and phone numbers of those creditors (21.0) _____

_____ 16. Name, address and phone number of funeral home (22.0) _____

_____ 17. List of expenses of last illness (unpaid at D's death), including names of payees and amounts paid for physicians, nurses, hospital, drugs, sick room equipment, etc. (23.0) _____

- _____ 18. If there is insurance on life of D that is payable to D's company, partners, fellow stockholders, or employees, give their names, addresses and telephone numbers and furnish complete details. (13.0) _____

Items to locate and bring with you:

CHECK WHEN
COMPLETED

- _____ 19. All signed copies of D's wills and codicils and memoranda concerning disposition of personal property; copies of all trusts created by or for the benefit of D or D's spouse; current financial statement for each of those trusts and a list of all beneficiaries with the birth dates; D's death certificate (one for each policy of insurance on D's life plus one additional for our file); copy of D's obituary notice and any newspaper articles if D's death was not from natural causes; documents relating to travel clubs, automobile associations, and other organizations if D's death was accidental; copies of will and codicils of D's spouse. (1.0; 2.0)
- _____ 20. If D served in military, bring certificate of discharge or separation and other documents relating to military benefits. (1.0)
- _____ 21. Deeds and contracts for deeds to all real estate owned or being purchased by D or D's spouse (including oil, gas, and other mineral interests) and, if owned with others, the names and addresses of all co-owners. If any property was purchased within 5 years of D's death, bring a copy of the closing statement. If the property was leased, bring copies of all leases. If survey plats, street addresses of the properties, copies of all appraisals made within 5 year of D's death, property tax receipts for most current year, and title policies are available, bring them, too. Also, please bring any documents where D created any easements, disposed of portions of the original property, or was involved in any condemnation proceedings. If real estate was not paid for, bring loan number, payment book and/or loan amortization schedule, and address of mortgage company or other note holder and copies of notes, mortgages, and other documents. Bring listing agreements or contracts for the purchase or sale of real estate by D or D's spouse pending at the date of D's death. (7.0)
- _____ 22. Original bonds, including government bonds and stock certificates owned or registered in the name of D or D's spouse or in combination with others. If securities are held for safekeeping or in an account by a broker or a custodian, please furnish most recent statement and name and address of firm where held. If D or D's spouse owned stock in a closely held corporation, please furnish income tax returns, balance sheets, and profit and loss statements for the five most recent years. In all instances, please provide copies of all restrictions on transfer of these securities. (8.0; 9.0; 10.0)
- _____ 23. Partnership, "buy-sell," employment, franchise, stock purchase, stock option, and other agreements signed by either D or D's spouse. If D or D's spouse owned an interest in a partnership, please furnish income tax returns, balance sheets, and profit and loss statement for the five most recent years. (10.0; 16.0)
- _____ 24. Statements, checks, and deposits for month before, month of, and month following D's death and checkbooks for one year prior to D's death for each bank, savings and loan, or credit union checking or savings account of D or D's spouse; all passbooks and actual certificates of deposit; statements for agency accounts for the benefit of D or D's spouse; receipts for safekeeping of valuables; traveler's checks and checks payable to D or D's spouse uncashed at date of D's death—especially Social Security and VA checks; keys to safe deposit boxes; name of D's officer or other person to contact; copies of signature cards and all agreements signed by D that relate to any of the foregoing accounts and certificates of deposit. (4.0; 11.0)
- _____ 25. All notes, accounts, and judgments payable to D or D's spouse, loan amortization schedules, and the name and address of each debtor. (12.0)

- _____ 26. All unpaid premium notices and all policies of insurance and all endorsements, including life, accident, burial disability, homeowner's automobile, personal property, fire and extended coverage, casualty, and medical and health insurance in which either D or D's spouse was an owner, beneficiary or insured, either individually or in combination with others, including any policy on the life of another (such as spouse or children). (13.0; 14.0; 15.0)

- _____ 27. Royalty agreements, including oil and gas royalties, owned by or paid to D or D's spouse. Bring as much additional information as you can locate, including leases, division orders, financial statements, check stubs for the 12 months prior to D's death, and statements from royalty payers. (7.0; 16.0)

- _____ 28. Titles to all automobiles, boats, airplanes, and other motor vehicles and mobile homes registered in the name of D or D's spouse and, if subject to a lien, a copy of the note, the loan number, payment book, and name and address of each lienholder. (17.0)

- _____ 29. All documents relating to pensions, profit sharing plans, annuities, franchises, patents, and copyrights. (19.0)

- _____ 30. Copies of D's personal financial statements for the last three years and copies of all notes payable by D or D's spouse; guaranty agreements signed by D or D's spouse. (21.0)

- _____ 31. Copy of funeral bills including cemetery lot, monuments, obituary notices, long distance telephone charges, floral offerings, memorial services, and any other related expenses. (22.0)

- _____ 32. Information concerning any estate from which D inherited any property in the last ten years and all documents (particularly the federal estate tax return and audit adjustments for that estate) related to such inheritance. (24.0)

- _____ 33. Copies of last three (3) income tax returns (federal, state and city) filed by D or D's spouse; copy of current declaration of estimated income tax for D or D's spouse and evidence of payment of past installments; and copies of all gift tax returns ever filed by D or D's spouse and complete details of all unreported gifts aggregating more than \$10,000 to any one person in a single year. (20.0; 26.0)

- _____ 34. Agreements between D and D's spouse; copies of property settlement agreements and divorce decrees relating to D's prior marriages. (3.0; 21.0)

- _____ 35. Booklets and other information describing present and past employment benefits for D and D's spouse including most recent statements of D's individual accounts; all information relating to Individual Retirement Account or HR-10 (Keogh) Plan for D or D's spouse; all information relating to Social Security benefits being received by or payable to D or D's spouse; all information relating to military, civil service or railroad retirement benefits being received by or payable to D or D's spouse; all information relating to annuities being received by or payable to D or D's spouse; all information relating to deferred compensation, pensions, and profit sharing plans of D or D's spouse. (19.0)

- _____ 36. Powers of attorney given by D to anyone.

- _____ 37. Copies of pleadings filed in suits in which D or D's spouse was a party at the time of D's death.

- _____ 38. Published articles, photographs, or descriptions of home furnishings, art work, collections, or other items shown in newspapers, magazines, and other publications.

PLEASE ASSEMBLE THE ITEMS IN THE ABOVE ORDER AND BRING THIS LIST WITH YOU.

NOTE: In order to obtain Social Security, Railroad Retirement, Medicare, and Veterans Benefits, you may need to locate and furnish D's birth certificate, marriage license, adoption and divorce documents, and military discharge certificate.

NOTE: In the event of an audit of D's death tax returns, it will be necessary to have D's check registers, bank statements, canceled checks, savings account records, and brokerage records for the three (3) years prior to and two (2) months following D's death.