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Estate and Probate Checklist

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YOUR INFORMATION

Full Legal Name: \_\_\_\_\_

Goes By: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Street Address: \_\_\_\_\_

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

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

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

Gender: \_\_\_\_\_

U.S. Citizen:        YES        NO

Marital Status:        Married        Single        Divorced        Widowed

If married, was there a prenuptial or postnuptial agreement?        YES        NO

If married, please also complete page 2

Military Service?:        YES        NO

If so, provide military branch and dates of service: \_\_\_\_\_

Receiving Medicaid?        YES        NO

WILL: YES        NO        TRUST: YES        NO

Referred By: \_\_\_\_\_

YOUR SPOUSE'S INFORMATION

Full Legal Name: \_\_\_\_\_

Goes By: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Street Address: \_\_\_\_\_

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

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

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

Gender: \_\_\_\_\_

U.S. Citizen:            YES            NO

Marital Status:        Married                    Single                    Divorced                    Widowed

If married, was there a prenuptial or postnuptial agreement?        YES            NO

If married, please also complete page 2

Military Service?:    YES            NO

If so, provide military branch and dates of service: \_\_\_\_\_

Receiving Medicaid?        YES            NO

WILL: YES            NO            TRUST:        YES            NO

PERSON(S) HANDLING AND/OR RECEIVING FROM YOUR ESTATE

1. Full Legal Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

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

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

RELATIONSHIP TO YOU: \_\_\_\_\_

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

Gender: \_\_\_\_\_

U.S. Citizen:            YES            NO

Marital Status:        Married                    Single                    Divorced                    Widowed

2. Full Legal Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_  
RELATIONSHIP TO YOU: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Gender: \_\_\_\_\_  
U.S. Citizen:            YES            NO  
Marital Status:        Married            Single            Divorced            Widowed

HEIRS NOT PREVIOUSLY LISTED (please advise if more space is needed)

3. Full Legal Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_  
RELATIONSHIP TO YOU: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Gender: \_\_\_\_\_  
U.S. Citizen:            YES            NO  
Marital Status:        Married            Single            Divorced            Widowed

4. Full Legal Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_  
RELATIONSHIP TO YOU: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Gender: \_\_\_\_\_  
U.S. Citizen:            YES            NO  
Marital Status:        Married            Single            Divorced            Widowed

5. Full Legal Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_  
RELATIONSHIP TO YOU: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Gender: \_\_\_\_\_  
U.S. Citizen:        YES        NO  
Marital Status:    Married        Single        Divorced        Widowed

6. Full Legal Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_  
RELATIONSHIP TO YOU: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Gender: \_\_\_\_\_  
U.S. Citizen:        YES        NO  
Marital Status:    Married        Single        Divorced        Widowed

7. Full Legal Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_  
RELATIONSHIP TO YOU: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Gender: \_\_\_\_\_  
U.S. Citizen:        YES        NO  
Marital Status:    Married        Single        Divorced        Widowed

FINANCIAL INFORMATION

**1. Own Home or any other real estate?** \_\_\_\_\_

*(If you own additional property and need more space, please use back of page)*

**REAL PROPERTY:**

Principle Residence; \_\_\_\_\_

Other Property; \_\_\_\_\_

Description/Address: \_\_\_\_\_

Description/Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Titled in whose Name: \_\_\_\_\_

Titled in whose Name: \_\_\_\_\_

Purchase Price: \$ \_\_\_\_\_

Purchase Price: \$ \_\_\_\_\_

Current Value: \$ \_\_\_\_\_

Current Value: \$ \_\_\_\_\_

Mortgage: \$ \_\_\_\_\_

Mortgage: \$ \_\_\_\_\_

Equity: \$ \_\_\_\_\_

Equity: \$ \_\_\_\_\_

**2. Other titled property (car, boat, camper/RV, etc.)?** \_\_\_\_\_

*(If you own additional property and need more space, please use back of page)*

**CAR(s):**

Description (Year/Make/Model): \_\_\_\_\_

Titled in Name(s): \_\_\_\_\_

Purchase Price: \$ \_\_\_\_\_ Current Value: \$ \_\_\_\_\_

Lien Holder: \_\_\_\_\_ Amount Owned: \$ \_\_\_\_\_

Description (Year/Make/Model): \_\_\_\_\_

Titled in Name(s): \_\_\_\_\_

Purchase Price: \$ \_\_\_\_\_ Current Value: \$ \_\_\_\_\_

Lien Holder: \_\_\_\_\_ Amount Owned: \$ \_\_\_\_\_

**3. Checking/Savings Accounts or CDs? \_\_\_\_\_**

*(If you have additional Accounts and need more space, please use back of page)*

**CHECKING:**

Institution: \_\_\_\_\_

Account Name: \_\_\_\_\_

Account #: \_\_\_\_\_

Approx. Balance: \$ \_\_\_\_\_

**SAVINGS:**

Institution: \_\_\_\_\_

Account Name: \_\_\_\_\_

Account #: \_\_\_\_\_

Approx. Balance: \$ \_\_\_\_\_

**OTHER: (Cd's, Additional Accts, Etc.)**

Institution: \_\_\_\_\_

Account Name: \_\_\_\_\_

Account #: \_\_\_\_\_

Approx. Balance: \$ \_\_\_\_\_

Institution: \_\_\_\_\_

Account Name: \_\_\_\_\_

Account #: \_\_\_\_\_

Approx. Balance: \$ \_\_\_\_\_

**4. Stocks, Bonds or Mutual funds or Brokerage Accounts? YES / NO**

**#1**

Company: \_\_\_\_\_

No. of shares: \_\_\_\_\_

Description: \_\_\_\_\_

Account Number: \_\_\_\_\_

Current Value: \$ \_\_\_\_\_

**#2**

Company: \_\_\_\_\_

No. of shares: \_\_\_\_\_

Description: \_\_\_\_\_

Account Number: \_\_\_\_\_

Current Value: \$ \_\_\_\_\_

**5. IRAs, Profit sharing or Pension plans? YES / NO**

Company: \_\_\_\_\_

No. of shares: \_\_\_\_\_

Description: \_\_\_\_\_

Account Number: \_\_\_\_\_

Current Value: \$ \_\_\_\_\_

**6. Business or Partnership interest? YES / NO**

Name of Company: \_\_\_\_\_

Type of Company (S Corp., LLC, Partnership): \_\_\_\_\_

Home state of Company: \_\_\_\_\_

Titled in Whose Name: \_\_\_\_\_

Value and Type of Interest: \_\_\_\_\_

**7. Life Insurance or Annuities? YES / NO**

Name of Company: \_\_\_\_\_

Policy Owner: \_\_\_\_\_

1st Beneficiary: \_\_\_\_\_

2nd Beneficiary: \_\_\_\_\_

Death Benefit \$ \_\_\_\_\_

**8. Owed money by anyone? YES / NO**

Description: \_\_\_\_\_

**9. Special Items of Value (antiques, jewelry, collections, tools, farm equipment, etc.)?**

Description: \_\_\_\_\_

Approximate Value: \$ \_\_\_\_\_

Description: \_\_\_\_\_

Approximate Value: \$ \_\_\_\_\_

Description: \_\_\_\_\_

Approximate Value: \$ \_\_\_\_\_

Description: \_\_\_\_\_

Approximate Value: \$ \_\_\_\_\_

**10. What is the approximate total value of all **Personal Property** not accounted for above?  
(Clothes, furniture, etc.)**

Approx. Value: \$ \_\_\_\_\_

**11. Debts other than mortgage (credit cards, personal loans, home equity loans, etc.)**

Creditor: \_\_\_\_\_

Amount Owed: \$ \_\_\_\_\_

Creditor: \_\_\_\_\_

Amount Owed: \$ \_\_\_\_\_

Creditor: \_\_\_\_\_

Amount Owed: \$ \_\_\_\_\_

Creditor: \_\_\_\_\_

Amount Owed: \$ \_\_\_\_\_



## DOCUMENTS TO CONSIDER PRIOR TO MAKING DECISIONS

- Any prior Last Will and Testament
- Any trust documents to which the you are a recipient or created
- Prenuptial or postnuptial agreements
- Death Certificates (if already deceased)
- Deeds and/or leases to all real estate
- An account statement for each of the accounts (bank, brokerage, CD, IRA, 401(k), etc.)
- Stock certificates
- Information about closely held businesses
- Life insurance policies
- Vehicle title and registration documents
- Boat/plane title documents
- Retirement beneficiary forms
- Divorce documents (if divorced)
- Funeral bills
- Any and all other bills
- Any document showing what the decedent may have owed if unsure (loans, credit cards, mortgages etc.)
- Any documents showing who might owe the decedent (promissory notes, etc.)
- Any information about charitable pledges
- Tax returns for last three tax year