



THE LAW OFFICE OF
Sara K. Yen
A PROFESSIONAL CORPORATION

DECEDENT'S ESTATE ORGANIZER

Date: _____

The information in this organizer is critical for settling the decedent's estate in accordance with decedent's wishes and applicable law. All information you give will be held in strict confidence. Please gather the following:

- Any bank or other account statements
- Lists of stocks, bonds
- Location of safe deposit box
- Last tax return
- Certified death certificates if issued
- Last will and testament
- Any trust or other agreements
- Copies of insurance policies, annuities, retirement plans
- Copies of real estate documents including deeds
- Copies of divorce decrees

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SEC. 1 DECEDENT'S INFORMATION

Decedent's Information

Full Legal Name _____
(Name most often used to title property and accounts)

Also Known As _____
(Other names used to title property and accounts)

Prefer to be called _____ Birth date _____ SS# _____ - _____ - _____

Date of Death _____ Place of Death _____

Home Address _____ City _____ State _____ Zip _____

Home Telephone (_____) _____ - _____ County of Residence _____

Employer _____ Position _____

Business Address _____ City _____ State _____ Zip _____

Business Telephone (_____) _____ - _____

E-mail Address _____

Married: Date of Marriage _____ Widowed Divorced: Date of Divorce _____ Never Married

Citizen of: USA Other _____

Spouse's Information

Full Legal Name _____
(Name most often used to title property and accounts)

Also Known As _____
(Other names used to title property and accounts)

Prefer to be called _____ Birth date _____ SS# _____ - _____ - _____

Date of Death _____ Place of Death _____

Home Address _____ City _____ State _____ Zip _____

Home Telephone (_____) _____ - _____ County of Residence _____

Employer _____ Position _____

Business Address _____ City _____ State _____ Zip _____

Business Telephone (_____) _____ - _____

E-mail Address _____ It is okay to communicate with me via Email.

Citizen of: USA Other _____

Have you located a Last Will and Testament? Yes: Date of Will _____ No

Location of the Original Will _____

Have you located a Trust? Yes: Date of Trust _____ No

Location of the Original Trust _____

SEC. 2 DECEDENT'S CHILDREN and/or BENEFICIARIES

Children/Beneficiary Information

Name _____ Birth date _____ Relationship to Decedent _____
Address/City/State/Zip _____
Telephone (please list work, home, cell) _____ SS# _____ - _____ - _____
Married _____ Number of Children _____

Name _____ Birth date _____ Relationship to Decedent _____
Address/City/State/Zip _____
Telephone (please list work, home, cell) _____ SS# _____ - _____ - _____
Married _____ Number of Children _____

Name _____ Birth date _____ Relationship to Decedent _____
Address/City/State/Zip _____
Telephone (please list work, home, cell) _____ SS# _____ - _____ - _____
Married _____ Number of Children _____

Name _____ Birth date _____ Relationship to Decedent _____
Address/City/State/Zip _____
Telephone (please list work, home, cell) _____ SS# _____ - _____ - _____
Married _____ Number of Children _____

Name _____ Birth date _____ Relationship to Decedent _____
Address/City/State/Zip _____
Telephone (please list work, home, cell) _____ SS# _____ - _____ - _____
Married _____ Number of Children _____

SEC. 2 DECEDENT'S BENEFICIARIES (continued)

Name	Birth date	Relationship to Decedent
_____	_____	_____
Address/City/State/Zip _____		
Telephone (please list work, home, cell) _____	SS# _____ - _____ - _____	
Married _____	Number of Children _____	

Name	Birth date	Relationship to Decedent
_____	_____	_____
Address/City/State/Zip _____		
Telephone (please list work, home, cell) _____	SS# _____ - _____ - _____	
Married _____	Number of Children _____	

Name	Birth date	Relationship to Decedent
_____	_____	_____
Address/City/State/Zip _____		
Telephone (please list work, home, cell) _____	SS# _____ - _____ - _____	
Married _____	Number of Children _____	

Name	Birth date	Relationship to Decedent
_____	_____	_____
Address/City/State/Zip _____		
Telephone (please list work, home, cell) _____	SS# _____ - _____ - _____	
Married _____	Number of Children _____	

Name	Birth date	Relationship to Decedent
_____	_____	_____
Address/City/State/Zip _____		
Telephone (please list work, home, cell) _____	SS# _____ - _____ - _____	
Married _____	Number of Children _____	

SEC. 3 DECEDENT'S ADVISORS

Name

Telephone

Tax Advisor (CPA, EA, etc.) _____

Family Attorney _____

Life Insurance Agent _____

Financial Advisor _____

Stock Broker _____

Banker _____

Other Advisor _____

SEC. 4 IMPORTANT QUESTIONS

Please check "Yes," "No," or "Uncertain" for your answer.

Was decedent (or spouse) receiving social security, disability, or other governmental benefits? Yes No Uncertain

Describe: _____

Was decedent (or spouse) making payments pursuant to a divorce or property settlement order? *Please provide a copy.* Yes No Uncertain

If decedent was married did the decedent and spouse sign a pre- or post-marriage contract? *Please provide a copy.* Yes No Uncertain

Has decedent been widowed? *If a federal estate tax return or a state inheritance tax return was filed, please provide a copy.* Yes No Uncertain

Did decedent ever file federal or state gift tax returns? *Please provide copies of these returns.* Yes No Uncertain

Did decedent complete trust, or estate planning? *Please provide copies of these documents.* Yes No Uncertain

If married, did decedent ever live in any of the following states while married? *Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas, Washington, or Wisconsin.* ... Yes No Uncertain

Is decedent named a beneficiary of anyone else's trust? *If so, please explain below.* Yes No Uncertain

Instructions for Completing the Decedent’s Property Information Checklist

General Headings

This *Property Information* checklist is designed to help you list all the property the decedent owned and what it is worth. If decedent did not own property under a particular heading, please leave that section blank. Under certain headings decedent may have owned more property than can be listed on this checklist. If so, please use **extra sheets** of paper to list decedent’s additional property.

Type

Immediately after the heading for each kind of property is a brief explanation of what property you should list under that heading.

“Owner” of Property

How decedent owned this property is **extremely important** for purposes of properly settling the decedent’s estate. For each property please indicate how the property is titled. When doing so, please use the following abbreviations:

Owner of Property	Abbreviation
If in Decedent’s name alone, with no other person	D
If in Spouse’s name alone, with no other person	S
Joint with spouse	JS
Joint with someone other than spouse	JO
Decedent’s Trust	TR
If you are not sure how the property is owned	?

SEC. 5 PROPERTY INFORMATION (continued)

DECEDENT'S REAL PROPERTY

TYPE: Any interest in real estate including decedent's family residence, vacation home, time-share, vacant land, etc.

General Description and/or Address (Including State)	Property Owner	Market Value	Loan Balance
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
Total			_____

FURNITURE AND PERSONAL EFFECTS

TYPE: Are you aware if the decedent owned any unique or valuable collections? List separately only major personal effects such as, jewelry, collections, antiques, furs, and all other valuable non-business personal property (indicate type below and give a lump sum value for miscellaneous, less valuable items.).

Type or Description	Owner	Market Value
Miscellaneous Furniture and Household Effects (Total)	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
Total		_____

AUTOMOBILES, BOATS AND RVS

TYPE: For each motor vehicle, boat, RV, etc. please list the description, how titled, market value, and encumbrance:

BANK & SAVINGS ACCOUNTS

TYPE: Checking Account "CA", Savings Account "SA", Certificates of Deposit "CD", Money Market "MM" (indicate type below). Do not include IRAs or 401(k) accounts here

Name of Institution and Account Number	Type	Owner	Amount
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Note: If Account is in decedent's name (or decedent's spouse's name) for the benefit of another, please specify and give other's name. Total _____

SEC. 5 PROPERTY INFORMATION (continued)

DECEDENT'S BUSINESS INTERESTS

TYPE: General and Limited Partnerships, Sole Proprietorships, privately owned corporations, professional corporations, oil interests, farm and ranch interests. **ADDITIONAL INFORMATION:** Give a description of the interests, who has the interest, decedent's ownership in the interests, and the estimated value of the interests.

Total _____

MONEY OWED TO DECEDENT

TYPE: Mortgages or promissory notes payable to decedent, or other moneys owed to decedent.

Name of Debtor	Date of Note	Maturity Date	Owed to	Current Balance
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Total _____

DECEDENT'S ANTICIPATED INHERITANCE, GIFT, OR LAWSUIT JUDGMENT

TYPE: Gifts or inheritances that decedent expected to receive at some time in the future; or money that decedent anticipated receiving through a judgment in a lawsuit. **Describe in appropriate detail.**

Description _____

Total estimated value _____

DECEDENT'S OTHER ASSETS

TYPE: Other property that decedent had that does not fit into any listed category above.

Type or Description	Owner	Market Value
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total _____

SEC. 5 PROPERTY INFORMATION (continued)

SUMMARY OF VALUES

Asset:	Amount *		
	Decedent	Spouse	Total Value
Real Property			
Furniture and Personal Effects			
Automobiles, Boats and RV's			
Bank and Savings Accounts			
Stocks and Bonds			
Life Insurance and Annuities			
Retirement Plans			
Business Interests			
Money Owed to Decedent			
Anticipated Inheritance, Etc.			
Other Assets			
Total Assets:			

** Note: For jointly owned property, enter half (1/2) in DECEDENT'S column and half (1/2) in SPOUSE'S column, unless actual ownership is otherwise.*

SEC. 6 FIDUCIARY INFORMATION

DECEDENT'S FIDUCIARY INFORMATION

Fiduciaries are individuals or institutions who act on the decedent's behalf or on behalf of decedent's loved ones.

GUARDIAN FOR MINOR CHILDREN: If decedent has any children under the age of 18 or disabled, determine who is named as guardian of the person and conservator of the property of each minor child, if known.

Name and Address	Relationship	Telephone Number

PERSONAL REPRESENTATIVE:

Name and Address	Relationship	Telephone Number

SUCCESSOR TRUSTEES:

Name and Address	Relationship	Telephone Number

DECEDENT'S WISHES AT DEATH: Are you aware of any specific wishes the decedent would like to make known concerning organ donation, disposition of decedent's remains, or any other matters?
___ yes ___ no. If yes, what are those wishes?

DECEDENT'S PERSONAL INSTRUCTIONS: Are you aware of any other personal instructions the decedent made?
___ yes ___ no. If yes, what are those instructions?
