



2542 S. Bascom Ave., Suite 200, Campbell, CA 95008

Phone: (408) 371-6000 | Fax: (408) 371-6005

[www.sowardslawfirm.com](http://www.sowardslawfirm.com)

# ESTATE ADMINISTRATION ORGANIZER

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In addition to completing this Organizer, **please bring the following items to the first meeting:**

Certified Death Certificate (at least one copy)

Last Will and Testament (the original, if you have it)

Trust and/or other estate plan documents

A copy of known asset information (Deed(s), bank/brokerage statement(s), retirement account(s), etc.)

# DECEDENT'S INFORMATION

**Decedent's** Legal Name \_\_\_\_\_  
Also Known As \_\_\_\_\_  
Birth date \_\_\_\_\_ SS# \_\_\_\_\_  
Date of Death: \_\_\_\_\_ Place of Death \_\_\_\_\_  
Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Employer \_\_\_\_\_ Position \_\_\_\_\_  
Business Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
E-mail Address \_\_\_\_\_  
 Married: Date of Marriage \_\_\_\_\_ Previously  Divorced  Widowed  Never Married  
Citizen of  USA  Other: \_\_\_\_\_ Date of Divorce: \_\_\_\_\_

**Spouse's** Legal Name \_\_\_\_\_  
Also Known As \_\_\_\_\_  
Prefer to be called \_\_\_\_\_ Birth date \_\_\_\_\_ SS# \_\_\_\_\_  
Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home Telephone \_\_\_\_\_ Business Telephone \_\_\_\_\_  
Employer \_\_\_\_\_ Position \_\_\_\_\_  
Business Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
E-mail Address \_\_\_\_\_  It is okay to communicate with me via my E-mail address  
Citizen of  USA  Other: \_\_\_\_\_

# CLIENT'S INFORMATION

Client Name \_\_\_\_\_  
Also Known As \_\_\_\_\_  
Birth date \_\_\_\_\_ SS# \_\_\_\_\_  
Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home Telephone \_\_\_\_\_ Cell Telephone \_\_\_\_\_  
E-mail Address \_\_\_\_\_  It is okay to communicate with me via my E-mail address

# JOINT CLIENT'S INFORMATION

Joint Client Name \_\_\_\_\_  
Also Known As \_\_\_\_\_  
Birth date \_\_\_\_\_ SS# \_\_\_\_\_  
Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home Telephone \_\_\_\_\_ Cell Telephone \_\_\_\_\_  
E-mail Address \_\_\_\_\_  It is okay to communicate with me via my E-mail address

**DECEDENT'S CHILDREN/SIBLINGS/ PARENTS AND/OR BENEFICIARIES**  
**(BOTH LIVING AND DECEASED)**

Use full legal name. In last column, use "JT" if both spouses are the parents, "H" if husband is the parent, "W" if wife is the parent.

**Name** \_\_\_\_\_ **Birth date** \_\_\_\_\_ **Parent or Relationship** \_\_\_\_\_

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

**Telephone:** \_\_\_\_\_ (work) \_\_\_\_\_ (home) \_\_\_\_\_ (cell) **SSN:** \_\_\_\_\_

**Married:** \_\_\_\_\_ **Number of Children:** \_\_\_\_\_

**Name** \_\_\_\_\_ **Birth date** \_\_\_\_\_ **Parent or Relationship** \_\_\_\_\_

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

**Telephone:** \_\_\_\_\_ (work) \_\_\_\_\_ (home) \_\_\_\_\_ (cell) **SSN:** \_\_\_\_\_

**Married:** \_\_\_\_\_ **Number of Children:** \_\_\_\_\_

**Name** \_\_\_\_\_ **Birth date** \_\_\_\_\_ **Parent or Relationship** \_\_\_\_\_

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

**Telephone:** \_\_\_\_\_ (work) \_\_\_\_\_ (home) \_\_\_\_\_ (cell) **SSN:** \_\_\_\_\_

**Married:** \_\_\_\_\_ **Number of Children:** \_\_\_\_\_

**Name** \_\_\_\_\_ **Birth date** \_\_\_\_\_ **Parent or Relationship** \_\_\_\_\_

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

**Telephone:** \_\_\_\_\_ (work) \_\_\_\_\_ (home) \_\_\_\_\_ (cell) **SSN:** \_\_\_\_\_

**Married:** \_\_\_\_\_ **Number of Children:** \_\_\_\_\_

**Name** \_\_\_\_\_ **Birth date** \_\_\_\_\_ **Parent or Relationship** \_\_\_\_\_

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

**Telephone:** \_\_\_\_\_ (work) \_\_\_\_\_ (home) \_\_\_\_\_ (cell) **SSN:** \_\_\_\_\_

**Married:** \_\_\_\_\_ **Number of Children:** \_\_\_\_\_

### 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)	Owner	Market Value	Loan Balance
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
<i>Total</i>		_____	_____

### DECEDENT'S FINANCIAL ACCOUNTS

**TYPE:** Any interest in bank accounts, credit unions, brokerage accounts, money market accounts, bonds, etc.

Institution Name, Account Number	Owner	Value
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

### DECEDENT'S OTHER ASSETS

**TYPE:** Sole proprietorships, partnerships, LLC's, stock options, vehicles, collections (artwork, jewelry, coins), etc.

Asset Type	Value
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

### DECEDENT'S RETIREMENT ACCOUNTS AND/OR INSURANCE

**TYPE:** IRA, Roth IRA, 401k, pensions, annuities, life insurance, etc.

Institution Name, Account Number	Beneficiary	Value
_____	_____	_____
_____	_____	_____
_____	_____	_____

## 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.

Name and Address	Relationship	Telephone No.
	Financial Advisor/Planner	
	CPA/Tax Preparer	
	Attorney	
	Guardian(s)	

**PERSONAL REPRESENTATIVE:**

Name and Address	Relationship	Telephone No.

**SUCCESSOR TRUSTEES:**

Name and Address	Relationship	Telephone No.

**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? \_\_\_\_\_  
If so, what are those wishes?

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**DECEDENT'S PERSONAL INSTRUCTIONS:** Are you aware of any other personal instructions the decedent made? If so, what are those instructions?

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**ANY PEOPLE/CREDITOR PROBLEMS:** For instance are there any unhappy, disinherited, disabled or predeceased family members? Are there any creditors, outstanding loans or unpaid taxes, etc.?

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