## LAW OFFICE OF KIMBERLY A. GOSSETT

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# **Probate Intake Questionnaire**

Your Name:		Date:		
What is the name of the Decedent (person who has died):				
What is the Decedent's Date of Death:				
What is the Decedent's Date of Birth:				
What is the Decedent's Home Address:				
Was the Decedent married at the time of his or her death:				
If so, what is the name and address of his or her spouse:				
Spouse's name		Spouse's Address		
Did the Decedent have any children at the time of his or her death:  If so, please list names, addresses and ages:				
Name	Ad	ldress	Age	

### Law Office of Kimberly A .Gossett Probate Intake Questionnaire - Page 2 of 3

Continuation Children's names					
Does the Decedent have a Last Will and Testament or Trust?					
Please provide the addresses of all beneficiaries named in the Last Will and Testament and/or Trust:					
Beneficiary Name	Address				
Please provide a list of the Decedent's Ass	sets:				
Asset		Approximate Value			

#### Law Office of Kimberly A .Gossett Probate Intake Questionnaire - Page 3 of 3

Please provide a list of all of the Decedent's creditors and amount owed to each:

Creditor	Amount owed

#### Please provide us with the following documents as soon as possible:

- 1. Original Last Will and Testament, plus any Codicils
- 2. Original Trust documents, plus any Trust Amendments
- 3. Original Death Certificate
- 4. Copies of all Bank Statements for accounts that were owned only by the Decedent
- 5. Copies of all Deeds for Real Property owned by the Decedent in his or her own name alone or as a tenant in common
- 6. Copies documents showing ownership of any other assets to be probated
- 7. Copies of all life insurance policies with no beneficiary designations
- 8. Copies of all of the Decedent's unpaid bills.