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ESTATE ADMINISTRATION FORM

Name of deceased _____

Address of deceased _____

City _____ **State** _____ **Zip Code** _____

County _____

Date of Death _____ **Today's Date:** _____

Spouse's name _____

Executor/Administrator Name _____

Address _____

City _____ **State** _____ **Zip Code** _____

Phone _____

Relation to decedent _____

Co-Executor/Co-Administrator Name _____

Address _____

City _____ **State** _____ **Zip Code** _____

Phone _____

Relation to decedent _____

Checklist of deceased's assets and liabilities:

Please be sure to include all account numbers where applicable

ASSETS:

Cash and Notes

| | Account numbers | Amount |
|---|------------------------|---------------|
| Checking accounts | | \$ |
| Savings accounts | | \$ |
| Certificates of deposit | | \$ |
| Credit union accounts | | \$ |
| Uncashed checks | | \$ |
| Notes held by decedent | | \$ |
| Debts due decedent | | \$ |
| Cash and valuables on decedent at death | | \$ |

Real Estate

| | Account numbers | Amount |
|---|------------------------|---------------|
| Residence | | \$ |
| Other real estate | | \$ |
| Cemetery lots | | \$ |
| Remainderman interest in estate | | \$ |
| Mortgages held by decedent | | \$ |
| Contracts to buy or sell by decedent | | \$ |
| Leases | | \$ |
| Limited partnership interest in real estate | | \$ |

Notes:

Stock and Bonds

| | Account numbers | Amount |
|--------------------------|------------------------|---------------|
| Stocks | | \$ |
| Bonds | | \$ |
| Mutual funds | | \$ |
| Government savings bonds | | \$ |

Personal Property

Please include Vehicle Identification Numbers (VIN) where applicable

| | Description (Including VINs) | Current value |
|------------------------------------|-------------------------------------|----------------------|
| Cars, trucks, boats, motorcycles | | \$ |
| Cars, trucks, boats, motorcycles | | |
| Cars, trucks, boats, motorcycles | | |
| Cars, trucks, boats, motorcycles | | |
| Cars, trucks, boats, motorcycles | | |
| Household furnishing and contents | | \$ |
| Personal property held by others | | \$ |
| Silver and gold | | \$ |
| Jewelry | | \$ |
| Hobby assets (coins, gems, stamps) | | \$ |
| Safe deposit box | | \$ |

Please indicate name of source

| | Source | Beneficiary designated | Amount |
|----------------------------------|---------------|-------------------------------|---------------|
| Wages | | | \$ |
| Vacation pay | | | \$ |
| Profit sharing | | | \$ |
| Pension plan | | | \$ |
| Savings plan | | | \$ |
| Benefits from previous employers | | | \$ |
| Qualified Retirement Plans | | | \$ |
| IRA | | | \$ |
| 401(k)/403(b) | | | \$ |
| Annuities | | | \$ |
| Roth | | | \$ |
| Life Insurance | | | \$ |
| Life Insurance | | | \$ |
| Life Insurance | | | \$ |

Miscellaneous

| | Description | Amount |
|--|--------------------|---------------|
| Business assets | | \$ |
| Custodial accounts | | \$ |
| Frequent flyer miles (transferable to heirs, value not applicable) | | |
| Pets and livestock | | \$ |
| Tax refunds | | \$ |
| Past due alimony or child support | | \$ |
| Transfers in contemplation of death | | \$ |
| 529 Plans | | \$ |
| Education savings accounts | | \$ |
| | | \$ |
| | | \$ |

The probable value of real and personal property of the decedent's estate is approximately
\$ _____

Any military service by decedent or spouse? _____

Are there any other proceedings relating to this estate pending? If yes, please name the county,
state, name of court, matter in which this estate relates to the proceedings, and file/case/docket
number. _____

LIABILITIES

For charge accounts, we will need to know the name and address of each creditor

| | Name(s) and address(es) | Account number(s) (if applicable) |
|------------------------------|--------------------------------|--|
| Charge accounts | | |
| House mortgage | | |
| Notes | | |
| Other mortgages | | |
| Utilities | | |
| Funeral bills | | |
| Taxes | | |
| Past due alimony | | |
| Child support | | |
| Debts due as fiduciary | | |
| Hospital | | |
| Doctor | | |
| Grave marker | | |
| Pledges to charity | | |
| Leases or rent | | |
| Judgments Sales contracts | | |
| Nursing Home Medicaid | | |
| Other | | |

Checklist of deceased's documents needed by personal representative

1. Will
2. Business records
3. Personal records
4. Canceled checks
5. Check register
6. Birth certificate
7. Divorce decrees and settlement agreements
8. Marriage certificate
9. Social security card
10. Income tax returns
11. Gift tax returns
12. Insurance policies
13. Securities
14. Motor vehicles, titles, and tag registrations
15. Deeds
16. Leases
17. Mortgages (loan deeds)
18. Charge cards
19. Death certificate
20. Correspondence during last year
21. Current bills
22. Contracts