

**ROBERTA J. ROBINSON**  
A LAW CORPORATION

Attorneys:  
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Daniel J. Wilson\*\*

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\*State Bar of California  
Board of Legal Specialization  
Estate Planning, Trust & Probate Law

\*\*LLM: Master of Laws in Taxation  
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**Estate Administration**  
**Preparation for the First Meeting**

Worksheets

In preparation for your first meeting, please work on completing the attached worksheets. Do not feel overwhelmed, since you have many months to gather all this information.

Immediate Action

These are the steps which need your immediate attention.

- |       |  |   |
|-------|--|---|
| _____ | Death Certificates:                          | Order several certified death certificates. Information which may be required: Decedent's mother's maiden name and where born; father's name.         |
| _____ | Original Will and Codicils:                  | Locate originals and provide to attorney. Make a copy for your records.   |
| _____ | Original Trust and Amendments:               | Locate originals and provide to attorney. Retain possession of Trust and all amendments.  |
| _____ | Social Security/Pensions:                    | Notify of death. 800-772-1213<br><a href="http://www.ssa.gov/appointment.htm">http://www.ssa.gov/appointment.htm</a><br>Request any death benefits.   |
| _____ | Social Security Online answers to Questions: | <a href="http://ssa-custhelp.ssa.gov/cgi-bin/ssa.cfg/php/enduser/std_alp.php">http://ssa-custhelp.ssa.gov/cgi-bin/ssa.cfg/php/enduser/std_alp.php</a> |

*Celebrating 35 Years of Service*

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Page 2

_____	Credit Cards:	Notify company of death and Destroy cards in decedent's name.
_____	Health Insurance	Notify insurer of the death.
_____	Automatic Payments:	Review and terminate if necessary, e.g., decedent's health insurance.
_____	Automatic Distributions:	Review and terminate if necessary, e.g., brokerage account monthly payments
_____	Change of Address:	Complete form with post office or on line.
_____	Liability Insurance:	Review policies and payment due dates.
_____	Addresses of heirs:	Provide attorney with names, mailing addresses, email addresses, and telephone numbers of heirs and beneficiaries.

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Asset Schedule for : \_\_\_\_\_ Date of Death: \_\_\_/\_\_\_/\_\_\_

Real Estate			Documents to Bring: Copy of Deed Written Valuation Mortgage Statement
Address	Title*	Value on Date of Death	Notes:

\*Title: Individual, Joint Tenancy with Right of Survivorship, Tenancy by the Entirety, Community Property, Tenants in Common, Community Property with Right of Survivorship

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Asset Schedule for : \_\_\_\_\_ Date of Death: \_\_\_/\_\_\_/\_\_\_

Stocks and Bonds			Documents to Bring: Copy of Each Account or Security Written Valuation
Named Owner	Beneficiary(ies)	Value on Date of Death	Notes:

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Asset Schedule for : \_\_\_\_\_ Date of Death: \_\_\_/\_\_\_/\_\_\_

Mortgages, Notes, Cash			Documents to Bring: Copy of Each Note/Trust Deed Receivable Cash Account Number Valuation
Named Owner	Beneficiary(ies)	Value on Date of Death	Notes:

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Asset Schedule for : \_\_\_\_\_ Date of Death: \_\_\_/\_\_\_/\_\_\_

Insurance on Decedent			Documents to Bring: Form 712 for Each Policy (Summary of Payoff)
Named Owner	Beneficiary(ies)	Value on Date of Death	Notes:

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Jointly Owned Accounts			Documents to Bring: Copy of Account List of Joint Tenants Written Valuation
Named Owner(s)	Beneficiary(ies)	Value on Date of Death	Notes:

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Asset Schedule for : \_\_\_\_\_ Date of Death: \_\_\_/\_\_\_/\_\_\_

<b>Miscellaneous:</b> Qtip Trust Assets (Trust C), Autos, Personal Effects, Personal Items \$3,000 or more (list), Safe Deposit Box			Documents to Bring: Copy of Each Account Written Valuation If Auto: Copy of Registration Used Bluebook Value
<b>Asset</b>	<b>Named Owner(s)</b>	<b>Value on Date of Death</b>	If Personal Effect: Total Used Value if Sold at Garage Sale If Personal Item \$3,000 or more: List of Item Value of Each Item If Safe Deposit Box: Location Contents Name on Box  <b>Notes:</b>



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Asset Schedule for : \_\_\_\_\_ Date of Death: \_\_\_/\_\_\_/\_\_\_

Trust Assets:			Documents to Bring: Copy of Each Account Written Valuation
Asset	Named Owner(s)	Value on Date of Death	Notes:

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Asset Schedule for : \_\_\_\_\_ Date of Death: \_\_\_/\_\_\_/\_\_\_

Annuities			Documents to Bring: Copy of Policy Summary of Payoff Income Tax Consequences on Payoff
Named Owner(s)	Beneficiary(ies)	Value on Date of Death	Notes:

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Liabilities Schedule for : \_\_\_\_\_

Date of Death: \_\_\_/\_\_\_/\_\_\_

Funeral Expenses		Documents to Bring: Copy of Bills \$1,000 or more
Payee	Amount	Notes:

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Liabilities Schedule for : \_\_\_\_\_

Date of Death: \_\_\_/\_\_\_/\_\_\_

Administration Expenses: Attorney Fees, Accounting Fees, Etc.		Documents to Bring: Copy of Bills \$1,000 or more
Payee	Amount	Notes:

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Liabilities Schedule for : \_\_\_\_\_

Date of Death: \_\_\_/\_\_\_/\_\_\_

Miscellaneous Expenses		Documents to Bring: Copy of Bills \$1,000 or more
Payee	Amount	Notes:

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Liabilities Schedule for : \_\_\_\_\_

Date of Death: \_\_\_/\_\_\_/\_\_\_

Debts, Mortgages, and Liens		Documents to Bring: Copies of Mortgages/Debts Owed by decedent Balance Due
Payee	Value	Notes:

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Decedent : \_\_\_\_\_

Date of Death: \_\_\_\_/\_\_\_\_/\_\_\_\_

Other

Documents to Bring:

Copy of Death Certificate

Year in Which Decedent Established Domicile in San Diego

Notes: