



## PEARSON BOLLMAN LAW

### Seeking Probate Administration Services?

At least 1 business day before your scheduled appointment, please return this completed form to [taylor@pearsonbollmanlaw.com](mailto:taylor@pearsonbollmanlaw.com).

#### Your Information

Full Name: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_

*City State ZIP Code*

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Your Relationship to the Decedent: \_\_\_\_\_

#### Information About the Estate

Name of the Decedent: Click or tap here to enter text.

Last address of the Decedent: Click or tap here to enter text.

Who does the will designate as Executor(s)?	Click or tap here to enter text.		
Please list all beneficiaries of the will:	Click or tap here to enter text.		
Did the Decedent own real estate?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Click or tap here to enter text.
		If yes, where is that property located? Please provide the county and state.	
What is the tax-assessed value of the above property?	Click or tap here to enter text.		
Did the Decedent have a business?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Click or tap here to enter text.
		If yes, what is the name of the business?	



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Did the Decedent have bank account, investment accounts, or retirement accounts?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes, please provide the types of accounts and estimated value of each:	Click or tap here to enter text.
Did the Decedent have debt?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes, please provide the types of debt and estimated amount of each:	Click or tap here to enter text.

Are we anticipating any claims regarding incapacity, undue influence, or other family dynamic issues?

Click or tap here to enter text.