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INTAKE WORKSHEET: PROBATE & TRUST ADMINISTRATION

Date of Consultation: __________________

Full Legal Name: ____

Other Names: ____

(Other names used to title property and accounts/former names)

Date of Birth: _________________________ SS#: _______________________ US Citizen? (y/n) ____

Home Address: ____

Mailing Address: ____

Home Phone: ________________ Cell: ________________ Email: ______________________________

Employer/Position ____ ❑ Permission to communicate with me via e-mail

Work Address: ____

YOUR MARITAL STATUS: ❑ Single ❑ Married ❑ Domestic Partner *(Registered? Y/N)* ❑ Separated ❑ Divorced ❑ Widowed

If married, please complete:

Spouse's Name: ____

Date of Marriage (if applicable): __________________________________

Please describe your relationship to the Decedent: ____

(i.e. I am the Brother of Decedent)

WHO REFERRED YOU TO PHILLIPS BALLENGER?

I'm a current client	☐ ________________	Internet Search	☐ ________________
Avvo.com	☐ ________________	Former Client	☐ ________________
Adviser	☐ ________________	Other	☐ ________________

Disclosures: Please note that providing this information and/or consulting with our firm does not establish an Attorney/Client relationship.

You acknowledge your understanding that an Attorney/Client relationship does not exist until / if we are formally engaged through a written retainer agreement, signed by both parties (law firm and client).

Phillips Ballenger has not agreed to represent you at this time, and the information you're providing will help us to evaluate whether we will be suited to take on your matter/provide legal services.

Decedent's Information:

Full Legal Name: ____

Other Names: ____

(Other names used to title property and accounts/former names)

Date of Birth: _______________ Date of Death: _______________ SS#: _______________ US Citizen? Y/N___

Home Address: ____

(Please check "Yes" or "No" for your answer)	Yes	No
Do you have a Certified Copy of the Decedent's Death Certificate? ***If so, please bring to your consultation***	☐	☐
Was the Decedent legally married on the date of his/her passing?	☐	☐
Did the Decedent have a Will? ***If so, please bring the Original Will to your consultation***	☐	☐
Did the Decedent have a Trust? ***If so, please bring a copy to your consultation***	☐	☐
Did the Decedent own Real Property (i.e. Real Estate)? ***If so, please bring a list of the property addresses, mortgage documents/statements, or other helpful information to your consultation*** Approximate Value: $___________	☐	☐
Did the Decedent have any Retirement Account(s)? (i.e. 401k/IRA's) ***If so, please bring a recent account statement and/or list of account(s) to your consultation*** Approximate Value: $___________	☐	☐
Did the Decedent have any Checking/Savings accounts? ***If so, please bring a recent account statement and/or list of account(s) o your consultation*** Approximate Value: $___________	☐	☐
Did the Decedent have any other types of accounts? (i.e. investment, brokerage) ***If so, please bring a recent account statement(s) and/or list of account(s) to your consultation*** Approximate Value: $___________	☐	☐
Did the Decedent have closely held businesses? (i.e. LLC's, Corporations) If so, business name: ______________________________	☐	☐
Did the Decedent own any vehicle(s)?	☐	☐
Did the Decedent have any other assets/debts not mentioned above?	☐	☐
Did the Decedent have any children? If so, are any of these children under the age of 18?	☐	☐

DECEDENT'S CHILDREN, DEPENDENTS, AND/OR OTHER HEIRS/BENEFICIARIES

NAME *(Full Legal Name)*	**RELATIONSHIP TO DECEDENT** *(i.e. Decedent's Son)*	**DATE OF BIRTH** *(or approx age if unknown)*	**LOCATION** *(Address, or if unknown, city & state of residence)*

ADDITIONAL INFORMATION & OTHER ITEMS TO DISCUSS:

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