RAINEY & RAINEY ATTORNEYS - PROBATE

Today's Date
Decedent's Full Name
Address City State Zip
Date of Death and Date of Birth
Decedent's age Last 3 of SS# Last 3 of Driver License#
County Where Decedent Passed
Decedent's Surviving Spouse (If Applicable)
Did the Decedent Have a Will? Yes No
Did the Decedent Receive Medicaid benefits? 🗆 Yes 🛛 No 🖾 Do Not Know
YOUR INFORMATION
Full Name
Relationship to Decedent

Work Phone	Home Phone
Cell Phone	E-mail

Full Address

HOW DID YOU LOCATE OUR OFFICES? (Please check each that applies and let us know who referred you to our firm. We like to thank those who recommend us.)

\Box Previously used our services	:	
\Box Referred by another client:		
□ Referred by a professional:		
□ General Reputation	□ Website	□ Internet Advertising
□ Yellow Pages	🗆 Waco Today	□ Other:



ADDITIONAL INFORMATION ABOUT YOU (Required by Court for Executor)

Date of Birth	Employer
Driver's License #	Social Security # (last 3 digits)
Have You Ever Been Convicted of or Arrested	for a Crime? \Box Yes \Box No
Spouse's Name	
Spouse's Cell Number	Spouse's E-Mail
Relative who will always know how to contact	you
Relative's Address	
Relative's Relationship to You	
Relative's Cell Phone	

DECEDENT'S MARITAL HISTORY

For each of Decedent's marriages, please provide the name of the spouse, the date of the marriage, the date the marriage ended, and the manner in which it ended (divorce, death or annulment):

Was the Decedent widowed at the time of death? \Box Yes \Box No						
If so, did the spouse who passed away first have a will? \Box Yes \Box No						
If the Decedent Was Predeceased by a Spouse, How Was the Spouse's Estate Handled?						
□ Probate	□ Administration	□ Affidavit of Heirship	🗆 Unknown			



CHILDREN OF DECEDENT

INEY LLP ATTORNEYS AT LAW

Full Name		Date of Birth	
Complete Address			
Phone			
Relationship to Decedent:	□ Natural Child	□ Adopted Child	□ Step Child
Child's Marital Status:	□ Single	□ Married	□ Divorced
Full Name		Date of Birth	
Complete Address			
Phone			
Relationship to Decedent:	\Box Natural Child	\Box Adopted Child	\Box Step Child
Child's Marital Status:	□ Single	□ Married	□ Divorced
Full Name		Date of Birth	
Complete Address			
Phone			
Relationship to Decedent:	\Box Natural Child	\Box Adopted Child	\Box Step Child
Child's Marital Status:	□ Single	□ Married	□ Divorced
Full Name		Date of Birth	
Complete Address			
Phone			
Relationship to Decedent:	\Box Natural Child	\Box Adopted Child	\Box Step Child
Child's Marital Status:	□ Single	□ Married	□ Divorced
Full Name		Date of Birth	
Complete Address			
Phone			
Relationship to Decedent:	□ Natural Child	\Box Adopted Child	\Box Step Child
Child's Marital Status:	\Box Single	□ Married	\Box Divorced
Q RAINFY			

DECEDENT'S ASSET AND DEBT INFORMATION

Did Decedent own any of the following? Check all that apply.

	Real	Property	(We	will	need	a	copy	of	a	previous	deed	which	has	a	legal
description	1)														

_____ Automobiles (We will need the make, model, year and VIN for each)

_____ Accounts without beneficiary designations (We will need the name of the bank, the account number, and the value of the account at death)

Did the Decedent owe any debts at the time of passing? \Box Yes \Box No

Describe:			

Do you expect any complications with the probate or the estate? \Box Yes \Box No

Explain:

Are there any family members who might want to contest the will? \Box Yes \Box No

Explain: _____

DOCUMENTS NEEDED FOR PROBATE:

<u>Original</u> Will of Deceased Family Member Certified Death Certificate Any Estate Documents You Believe are Relevant to the Probate

