Brauman Moore & Harvey Law Offices

Attorneys at Law

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Dear Client,

Thank you for calling Brauman Moore & Harvey Law Offices to Assist you and your family with the death of your loved one. At your first appointment, we will determine what assets your loved one had and how they should be transferred to the intended heirs. Below is the list of items needed for your appointment. Please locate as much of this documentation as you can. <u>You are more than welcome to drop off copies of these documents or email them to the probate paralegal, Stephanie, at ma2@braumanlaw.com</u>. If you have any questions regarding these items, please call us at 317-858-5000.

- **<u>Death Certificate</u>**
- Account statements that reflect the account value on the date of death (this includes statements/balances for: bank accounts, CD's, investment accounts, retirement accounts, stocks, etc.)
- Any savings bonds or annuities your mother may have had.
- Proof of any other assets such as life insurance policies, real estate deeds, etc.
- Copies of funeral expenses and/or outstanding bills – as time progresses, please get each bill to our office in order that we may give proper notice to the creditor.
- **<u>A list of the names, addresses, phones numbers, and emails of all the heirs</u>**
- The original Last Will and Testament, if applicable
- Copies of trust documents (if applicable) and/or notebook for trust (if a current client)
- We need information for any pensions, and health insurance your loved one had at the time of their passing. If you call any pension provider, be sure to ask if there are any other benefits available to your loved one such as life insurance provided by pension company. If you have not called by the time of your first appointment, we would call at that appointment with you.
- Please provide the most recent tax return.
- The funeral home should have notified social security and if your loved one was receiving VA benefits, please get us as much information about the benefit as possible.

If you have trouble location any items on the list, or with obtaining values for any accounts, we can help you with that during your first appointment. We look forward to assisting you and your family during this difficult time.

Sincerely,

/s/ Doris G. Brauman Moore, RN, JD
Doris G. Brauman Moore, RN, JD
/he

Brauman Moore and Harvey Law Offices

After Death Client Information Sheet

Please fill out the information below and on the chart to the best of your knowledge with the deceased information. It is important we have the contact information of all heirs of the deceased.

Legal Name: ______________________________ ______ ________________________________
First M.I. Last

Address: ____

City: __________________________ State: ______________ Zip: ____________________________

County at Death: ________________________ Date of Birth: ______________________________

Date of Death: _________________________ SSN: _____________________ Age: ____________

Marital Status at Death: Never Married Divorced Widowed Sigle Married

If Married, full legal name of Spouse: ____

Spouse's Age: _________ Spouse's Health: ____

____

CHILDREN/ HEIRS AGE CHILD OF

Name: _______________________________________ ________ BOTH or __________

Address: ____

E-Mail: ____

Contact Number: ____

Name: _______________________________________ ________ BOTH or __________

Address: ____

E-Mail: ____

Contact Number: ____

Name: ______________________________ ______ BOTH or ________

Address: ____

E-Mail: ____

Contact Number: ____

Name: ______________________________ ______ BOTH or ________

Address: ____

E-Mail: ____

Contact Number: ____

Name: ______________________________ ______ BOTH or ________

Address: ____

E-Mail: ____

Contact Number: ____

Name: ______________________________ ______ BOTH or ________

Address: ____

E-Mail: ____

Contact Number: ____

Name: ______________________________ ______ BOTH or ________

Address: ____

E-Mail: ____

Contact Number: ____

Number of Grand Children: __________________ Range of Ages: ___________________

How did you hear about our office? ____

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Resource Description/ Institution Name	Joint Owner or Beneficiary/TOD,POD	Value at Death	Most Current Value
BANK ACCOUNTS and CDs			
INVESTMENTS (Non-Qual.) (Stocks, Bonds, Mutual Funds, Other)			
LIFE INSURANCE and ANNUITIES – Death Benefit			
REAL ESTATE		Zillow/Assessed Value	Mortgage/Loan Balance
VEHICLE(S) (autos, R.V., boat, etc)	Loan Balance	KBB/Fair Market Value	
TOTAL NON QUALIFIED			$
QUALIFIED FUNDS (pre-tax funds- Retirement Accts			
TOTAL QUALIFIED FUNDS			$
		TOTAL AVAILABLE RESOURCES	$
INCOME SOURCES	Amount Per month	Life Insurance Attached	Death Benefit/ Spousal benefit
SOCIAL SECURITY			
Pension			