

# ESTATE INFORMATION SHEET

**FOR REGISTER'S OFFICE USE ONLY**

County Code	Year	File Number
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**DECEDENT INFORMATION: Enter data as it will appear on all documents submitted to the department.**

Name (Last)	(First)	(Middle)
Decedent's Social Security Number	Date of Death	Date of Birth

**TYPE FILING: Enter check (✓) mark to indicate the nature of the return to be filed with the department.**

<input type="checkbox"/> Probate Return	<input type="checkbox"/> Joint Assets Only	<input type="checkbox"/> Estate Tax Only	<input type="checkbox"/> Litigation Purposes (No Other Assets)
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**LETTERS GRANTED: Enter check (✓) mark to indicate the nature of the proceedings at the Register of Wills Office. (Attach additional sheets if explanation is necessary.)**

<input type="checkbox"/> Testamentary	<input type="checkbox"/> Administration	<input type="checkbox"/> No Letters	<input type="checkbox"/> Other (Please Explain)
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**ATTORNEY/CORRESPONDENT: Enter all data concerning the attorney or other individual to receive all tax information and correspondence.**

Name (Last)	(First)	(Middle)	Supreme Court I.D. No.
Street Address			
City	State	Zip Code	Telephone Number

**PERSONAL REPRESENTATIVE INFORMATION: Enter all data concerning the personal representative(s) of the estate authorized by the Register of Wills**

**Executor/Administrator**

Name (Last)	(First)	(Middle)	Social Security Number
Street Address			
City	State	Zip Code	Telephone Number

**Co-Executor/Administrator**

Name (Last)	(First)	(Middle)	Social Security Number
Street Address			
City	State	Zip Code	Telephone Number

**Co-Executor/Administrator**

Name (Last)	(First)	(Middle)	Social Security Number
Street Address			
City	State	Zip Code	Telephone Number

Prepared By	Date
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