

**Augusta County Circuit Court
Probate Division
1 East Johnson St., Staunton, VA 24401
Becky Kimble, Deputy Clerk (540) 245-5317
Hunter Hopkins, Deputy Clerk (540) 245-5321, Ext. 107**

NOTE: Our office provides this form as a guide to assist you in determining the estimated value of assets for estate purposes and should only be used as such. This is not a legal document.

To serve you more efficiently, we ask that you request an appointment with one of our Probate Deputy Clerks and provide the following information at the time of your meeting.

PROBATE INFORMATION WORKSHEET

NAME OF DECEDENT: _____
RESIDENCE ADDRESS: _____

If the Decedent resided in a nursing home/long-term care facility at the time of death, please provide the prior residence address:

Did the Decedent have a will? YES NO (If Yes, bring ORIGINAL to your appointment)

Name(s) and address(es) of named Executor(s) OR person(s) requesting appointment as personal representatives of the Decedent's estate:

(Add additional sheet if necessary)

Please provide a Death Certificate at the time of your appointment.

Please provide a list of all known heirs (next of kin) along with their addresses and whether they are "adults" or "minors". Names of deceased heirs are also required. If you are not sure what qualifies as an heir, please ask when you schedule the appointment, and we will assist you.

You will also need an estimated value of the Estate. Having the value prior to your appointment will help determine what procedure we will follow during the appointment, but it is not necessary. Please refer to the Guide on the next page to assist you in determining the value of the estate.

1. List those accounts in the name of the decedent only. (Do NOT include values of joint accounts.) If there is a beneficiary or "payable on death" designated on an account, do not include on the list below.

Assets:	Value:
Checking	\$ _____
Savings	\$ _____
Stocks/Bonds	\$ _____
Money Market	\$ _____
Investments	\$ _____
Notes Receivable	\$ _____
Cash on Hand	\$ _____
Other	\$ _____

TOTAL \$ _____

2. Was the Decedent the **sole owner** of any property requiring transfer of title (i.e. automobiles, trailers, boats, mobile homes, etc.)
 If yes, the value \$ _____
3. Did the Decedent have a life insurance policy? Was a beneficiary named? If yes, do not include value in the information provided to us. If the policy is payable to the estate, what is the death benefit payment?
 \$ _____
4. Estimated value of personal effects and household furnishings (do NOT include value from paragraph 1 above)?
 \$ _____
5. Did the Decedent have an interest in other estate or trust which had not been distributed prior to the decedent's death?
 \$ _____
6. If the Decedent owned any interest as a sole proprietor, partner, limited partner or corporate partner, you will need to determine if such interest should be included as part of the decedent's assets. If you are unsure, please seek legal advice.
 \$ _____

TOTAL OF ALL PERSONAL ASSETS (1-6) \$ _____

7. Did the Decedent own any real estate in Virginia? Yes No
 Is the Decedent the **sole owner** of such real estate Yes No

If Yes **TOTAL OF VIRGINIA REAL ESTATE** \$ _____