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	Suc	ccession Informat	ion Form		
Info	rmation About the Dec	edent			
1.	Please provide:				
	a. Full name of Decedent:				
	b. Did Decedent have a Last Y	Will:			
	c. Date of Death:	; Parish of	Residence:		
	d. Address at time of Death:_				
	e. Marital Status:				
	f. Full Name of Current Spou	ise:			
	h. Person providing info:		; Relationship:		
	Telephone:	Email:			
2.	Please provide Decedent's children's full names, birthdates, and contact information, including any children that may have predeceased (attach additional sheet with information, if needed):				
	a. Child:	, DOB:	, Email:		
	Address:		, Phone:		
	b. Child:	, DOB:	, Email:		
	Address:		, Phone:		
	c. Child:	, DOB:	, Email:		
	Address:		, Phone:		
	d. Child:	, DOB:	, Email:		
	Address:		, Phone:		

## **Real Estate Owned:**

Address and description (family home? Vacant lot?):	Value at Death	Lien? And if so,	

Vehicles, Boats, and Tr		:	Value of D		
Year, Make, Model	VIN:		Value at Dea	ath I	Balance of Lien:
Bank and Financial Ac Bank /Financial Entity and Loca		nt Number		Bal	lance at Death:
1. Did Decedent own an intere If yes, please describe:	•	Y / N			
2. Are there any digital assets If yes, please describe:	that need to be acc	eessed? Y	/ <b>N</b>		
3. Is there a Safe Deposit Box?	Y / N				
4. Are there any rents, notes, of If yes, please describe:	or accounts receiva		he Decedent?	? Y / :	N
Decedent's Debts, if an	y				
Creditor Name and Location	Account Numb	per		Bal	lance

1. Does anyone need to be reimbursed for any expenses, such as legal fees for the succession or

funeral/burial expenses If so, who and for what	s? Y / N amount?					
0 0	Are the heirs going to reimburse this sum amongst themselves? Y / N If not, do we need to direct a financial institution to reimburse and if so, which financial institution					
3. Did Decedent receive N	Iedicaid at any time? Y	/ N If yes, when	n?			
4. Did Decedent have any If yes, please describe:	credit life insurance ava					
5. Did you file the Decede And, for the year the D	ent's tax return for the la eccedent passed? Y / N. ** If not, please engage	· ·				
Burial Plot/Pre-Pai	d Funeral Plan (are		•	4 1 7 7 1	1	
Location			Best Estir	nated Valu	e: 	
Other Property (stoc	ks, bonds, mutual funds, 1	mineral leases, jev Balance/Va		etc.) Decedent of Balanc		
1. Household furnish	ings:					
Funeral & Burial E	xpenses	Amount Pa	id	Pre-Paid by	y Decedent?	
				Y	N	
Other Known Heirs	S					
Names:	Address, Email A	ddress, and Telep	hone:	Date o	of Birth:	

1. Do any of the above heirs have a mental or physical disability or receive government benefits for which an inheritance could disrupt? Y / N

2. Are there any heirs for which their location/whereabouts are unknown?  $\, Y \, / \, N \,$ 

Checklist of Required Documents to File Succession:				
	Original Will, if applicable			
	Original Death Certificate			
	Legal description for real estate. This could be Act of Sale/Donation or Judgment of Possession.			
	Supporting Documents for Real estate and business valuations – could be an appraisal, recent deed, a			
	broker price opinion, and/or a Tax Assessor valuation.			
	Copies of title or registration for any vehicle, or the VIN.			
	Copies of bank statements or investments which include dates close to decedent's date of death.			