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LEGAL DOCUMENT ASSISTANT
[LDA Reg. #2019320398 ~ L.A. County]

QUESTIONNAIRE

Petitioner:

Name: _____

Home Address: _____

Work Address: _____

Tel No.(s): Home: _____ Cell: _____ Work: _____

Email Address: _____ D.L.: _____

DOB: _____ S.S #: _____

Relationship to Decedent: _____ Publication: _____

Decedent:

Name: _____

Address: _____

DOB _____ SS#: _____

DOD: _____ Place of Death: _____

County of Death: _____ Marital Status: _____

Spouse's name: _____


If divorce: Date of Divorce: _____ If died, DOD: _____


Will/Estate Plan/Trust: _____ Bond: Yes/No _____


Received Medical: _____ Tax Debts: _____


Children & Grandchildren:


List all of the Decedent’s children/grandchildren, include adopted, Names, Addresses, Ages, living or deceased:

 _____

 _____


 _____


 _____


 _____


Family Members:


List all family members, Names, addresses, ages and relationships to decedent, living or deceased:

 _____

 _____


 _____


 _____


 _____


Ben/Heirs:


List all Names, addresses, ages and relationships to decedent mentioned in the Will, living or deceased:

 _____

 _____

 _____

 _____

 _____

Assets:




Real Property: _____

Value of Real Property: \$_____ Encumbrances (less): \$_____

Annual income from Real Property: \$_____ Value of Personal Property: \$_____

Any other assets outside the State of California:

REQUIRED DCTS:

-  Death Certificate
-  Wills and/or Trust, if applicable
-  Deed(s)