

**KERSHAW COUNTY PROBATE COURT WORKSHEET**

This worksheet must be completed before your opening appointment.

**A. Real Estate (In State and Out of State)**

Location (Street/City/State)                      Owner's Name                      Value

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CEMETARY PLOT(S)              (Owned by decedent)

Location: \_\_\_\_\_

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**B. STOCKS, BONDS (in decedent's name alone)**

Stocks: \_\_\_\_\_

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Bonds: \_\_\_\_\_

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**C. CASH, INDIVIDUAL BANK ACCOUNTS\*, NOTES OWED TO DECEDENT**

\*Joint Bank Accounts- See Schedule E.

Cash on hand? Yes\_\_\_ No\_\_\_ If yes, amount \$ \_\_\_\_\_

Paycheck?      Yes\_\_\_ No\_\_\_ If yes, amount \$ \_\_\_\_\_

From: \_\_\_\_\_ Payable to \_\_\_\_\_

Refund Checks? Yes\_\_\_ No\_\_\_ If yes, amount \$ \_\_\_\_\_

From: \_\_\_\_\_ Payable to \_\_\_\_\_

From: \_\_\_\_\_ Payable to \_\_\_\_\_

Mortgage due decedent? Yes\_\_\_ No\_\_\_ If yes, amount \$ \_\_\_\_\_

From: \_\_\_\_\_

Inheritance to be received by decedent: yes\_\_\_ no\_\_\_ Describe: \_\_\_\_\_

	Bank/Company Name	Amount
Checking Account(s):	_____	_____
	_____	_____

Savings Account(s): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 C.D.(s): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Other (list): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**D. Part 1 – INSURANCE PAYABLE TO THE ESTATE:**

Company Name & Policy Number	Face Value
_____	_____
_____	_____

**Part 2- INSURANCE PAYABLE TO BENEFICIARY:**

Beneficiary Name	Company Name & Policy Number	Face Value
_____	_____	_____
_____	_____	_____

**E. JOINTLY OWNED PROPERTY (With Right of Survivorship)**

Exact Names on Account	Bank/Company Name	Amount
Checking Account(s): _____	_____	_____
_____	_____	_____
Certificate(s) Of Deposit: _____	_____	_____
_____	_____	_____
Stocks: _____	_____	_____
_____	_____	_____
Bonds: _____	_____	_____
_____	_____	_____
Real Property: (Bring Copy of Deed) _____	_____	_____
_____	_____	_____
Other (list- vehicle, etc.) _____	_____	_____
_____	_____	_____

**F. MISCELLANEOUS**

Household Goods & Furnishings \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Vehicles (auto, etc.)	Exact name on Title	Year/Model	Value
_____	_____	_____	_____

Boats, Motors, and  
Trailers:

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Mobile Homes:

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Farm Equipment:

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Description

Approximate Value

Business owned:

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Jewelry (of value):

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Collectibles:

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Capital Credits (Co-ops)

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Other (list):

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**G. TRANSFERS DURING DECEDENT'S LIFE**

Beneficiary

Value

Trust:

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Life Estate:

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Savings Bond (POD):

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Other (list):

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**H. POWERS OF APPOINTMENT**

DID DECEDENT hold a Power of Appointment given by another? \_\_\_\_\_

If yes, bring a copy of the document creating the Power.

DID DECEDENT hold any of the following titles at time of death? \_\_\_\_\_

If yes, for whom? \_\_\_\_\_