

# HORRY COUNTY PROBATE COURT WORKSHEET

## A. REAL ESTATE (IN STATE AND OUT OF STATE)

LOCATION (Street/City/State)	Owner's Name	Value
_____		
_____		
_____		
_____		

## CEMETARY PLOT(S) (Owned by Decedent)

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

## B. STOCKS, BONDS (in Decedent's name alone)

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

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

## 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):	_____	
	_____	

CD(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 No.

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, if available)

Other (list – vehicles, etc.): \_\_\_\_\_

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**F. MISCELLANEOUS**

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

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	Exact name on Title	Year/Model	Value
Vehicles (auto, etc.):	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
Boat, motors, and Trailers:	_____	_____	_____
	_____	_____	_____
Mobile Homes:	_____	_____	_____
	_____	_____	_____
Farm Equipment:	_____	_____	_____
	_____	_____	_____

	Description	Approximate Value
Business owned:	_____	_____
Jewelry (of value):	_____	_____
Collectibles:	_____	_____
Other (list):	_____	_____
	_____	_____
	_____	_____

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

	Beneficiary	Value
Trust:	_____	_____
Life Estate:	_____	_____
Savings Bonds (POD):	_____	_____
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?

Guardian:	yes ___ no ___	_____
Custodian:	yes ___ no ___	_____
Committee/Conservator:	yes ___ no ___	_____
Trustee:	yes ___ no ___	_____
Estate Representative:	yes ___ no ___	_____
Other (specify):		_____

**I. ANNUITIES**

	Beneficiary Name	Company Name	Value
IRA:	_____		
Pension:	_____		
401K:	_____		
Keogh:	_____		
Other (list):	_____		

**J. ENCUMBRANCES (Mortgages, Liens, Judgments, etc.)  
(House, Land, Automobile, etc.)**

Company Name	Description	Amount
_____		
_____		
_____		
_____		

**OUTSTANDING DEBTS/BILLS OWED BY THE DECEDENT  
(Funeral, Hospital, EMS, Doctors, Credit Cards, etc.)**

Name of Creditor	Amount Owed
_____	
_____	
_____	
_____	

