ESSENTIAL ACCOUNT CHECKLIST

Account Summary Form

___ Completed with original signature(s) and one copy. Please sign in blue ink.

___ Beginning Assets match the Inventory value (if First Account) or Last Account Assets on Hand figure (if 2nd or subsequent account).

___ Lines 5 and 10 balance to the penny without any forced adjustments.

___ Itemized list provided for each figure on Account Summary Form.

___ Receipts listed by date, in chronological order, with description of credit and amount.

___ Gains on Asset Sales reflects the inventory/carrying value and gross sale price (number of shares & price per share) for each sale. List any fees in Disbursements.

___ Adjustments reflect the inventory/carrying value, the corrected/adjusted value together with the reason for the adjustment.

___ Disbursements are listed by date, in chronological order, together with the payee, description of charge, amount paid and check number, if any.

___ Losses on Asset Sales reflect the inventory/carrying value and gross sale price (number of shares & price per share) for each sale. List any fees in Disbursements.

___ Distributions are listed by date, in chronological order, and include payee and amount.

___ Assets on Hand reflect the inventory/carrying value and the fair market value for each asset. If it is a final account, there will be zero assets on hand.

ONE (1) set of backup documents to include:

___ Cancelled check or check image for each disbursement.

___ Bank and/or brokerage statements for all accounts listed on the Inventory from the date of death through the end of the accounting period or closing of the account(s).

___ Bank and/or brokerage statements for the Estate Account(s) for the duration of the accounting period.

___ Invoice, receipt or similar voucher for each disbursement.

___ Cancelled check or check image for any cash distribution or original signed receipt for any non-cash distribution.

___ Date of birth for each beneficiary, if an age of distribution is referenced in the Will.

___ Settlement Statement, if real estate was sold.

___ Copy of Revocable Trust document, if any assets distributed to a Revocable Trust, to confirm Trustee(s).

___ Filing Fee – check made payable to the Commissioner of Accounts. We are unable to accept credit cards.