



THE LAW OFFICES OF ODELIA GOLDBERG  
ATTORNEYS & COUNSELORS AT LAW  
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### PROBATE INTAKE FORM

This form is extremely important. Your accuracy and completeness in responding will help The Law Offices of Odelia Goldberg represent you. Please email the completed information, prior to your initial consultation.

Date: \_\_\_\_\_

Full Legal Name of Decedent (person who passed): \_\_\_\_\_

Date of passing: \_\_\_\_\_

Does decedent have a Last Will and Testament  YES or  NO

If yes, do you have the original in your possession  YES or  NO

Do you have an original Short Form Death Certificate  YES or  NO

Primary Contact/ Proposed Personal Representative (PR):

\_\_\_\_\_

Relationship to Decedent: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

City, County, and State where decedent lived when they passed:

\_\_\_\_\_

Please list any known real property in decedent name: \_\_\_\_\_

\_\_\_\_\_

Please list any other know assets in decedent name: \_\_\_\_\_

\_\_\_\_\_

Other information you think is important: \_\_\_\_\_

\_\_\_\_\_