

MASTER PROBATE CHECKLIST

(SAMPLE ONLY—THIS IS NOT A COMPLETE CHECKLIST)

(USE THIS SAMPLE AS A GUIDELINE TO CREATE YOUR OWN)

Name of Estate Personal Representative SS# of Decedent / ID# of Estate Probate Number/County	Date of Death	PR Appt.	1st Pub. Date	Notice to Heirs	Inven. Filed	Indiv. Inc. Tax Ret.	Req. for Audit	Four Mos. Exp.	File Final Acct.	Not. Final Acct.	Req. for Release	Judgment Obtained and Est. Closed

IMPORTANT NOTICES

This material is provided for informational purposes only and does not establish, report, or create the standard of care for attorneys in Oregon, nor does it represent a complete analysis of the topics presented. Readers should conduct their own appropriate legal research. The information presented does not represent legal advice. This information may not be republished, sold, or used in any other form without the written consent of the Oregon State Bar Professional Liability Fund except that permission is granted for Oregon lawyers to use and modify these materials for use in their own practices. © [2018] OSB Professional Liability Fund.