

IN THE CIRCUIT COURT OF THE FOURTEENTH JUDICIAL CIRCUIT
ROCK ISLAND COUNTY, ILLINOIS
PROBATE DIVISION

IN RE THE ESTATE OF:)
) CASE NO. _____ P _____
)
)
_____)
Decedent

DECEDENT'S ESTATE STATUS REPORT

The undersigned, as attorney for the above-referenced estate or as the representative of the decedent's estate without being represented by an attorney, certifies as follows:

1. **Type of Estate:** ___ Intestate ___ Testate ___ To Collect ___ Includes Trust
2. **Administration:** ___ Supervised ___ Independent ___ Ancillary
3. **Will:** ___ None ___ Admitted ___ Contested
4. **Notices Mailed Or Published:** ___ Will Admitted ___ Will Denied
___ Independent Administration ___ Creditor Claim ___ Current Account
___ Other: _____
5. **Inventory:** ___ Filed ___ Mailed
6. **Awards:** ___ Spousal ___ Child ___ Paid
7. **Claims:** ___ None ___ All Allowed ___ Prorated ___ Disputed
8. **Distributee(s):** ___ Disabled Adult ___ Minor(s) ___ Died
___ Whereabouts unknown ___ Disputed
9. **Taxes:** ___ Decedent's **federal and/or state individual income** tax return(s)
required but not yet filed
___ Decedent's **federal and/or state individual income** taxes due and
owing but not yet paid
___ Waiting for **federal and/or state income** tax refund
___ **Federal estate tax** return is required but not yet filed
___ **Federal estate tax** return filed but waiting for acceptance
___ **Illinois inheritance tax** return is required but not yet filed
___ **Federal and state fiduciary tax** return(s) required but not yet filed

10. **Assets:** ___All collected ___All liquidated, distributed or to be distributed
 ___Issues, if any: _____

11. **Real Estate:** ___None ___Sold ___Filed Release of Interest in Real Estate
 ___For Sale ___Still preparing for sale ___Recorded Notice of Probate
 ___In foreclosure
 Issues: _____

12. **Current Account:** ___Filed ___Mailed ___Approved by Court
 ___Disputed Issues, if any: _____
13. **Fees of Representative:** ___None ___Approved ___Disputed
14. **Fees of Attorney:** ___Approved ___Disputed
15. **Other matters affecting closing of state:** _____
16. **Projected date estate will close:** _____

Date: _____ **Attorney or Representative:** _____

VERIFICATION

Under the penalties of perjury as provided by law pursuant to Section 1-109 of the Code of Civil Procedure, the undersigned certifies that the statements set forth in this instrument are true and correct, except as to matters therein stated to be on information and belief and as to such matters the undersigned certifies as aforesaid that the undersigned verily believes the same to be true.

Attorney or Representative(s):

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____