

INHERITANCE TAX JOINT BANK ACCOUNT ADVANCE PAYMENT WORKSHEET

COUNTY FILE NUMBER
INHERITANCE TAX RECEIPT NUMBER

DECEDENT INFORMATION	DECEDENT'S NAME (LAST) (FIRST) (MIDDLE INITIAL)
	DECEDENT'S SOCIAL SECURITY NUMBER DATE OF DEATH
	ADDRESS OF DECEDENT CITY STATE ZIP

FINANCIAL INSTITUTION INFORMATION	NAME OF FINANCIAL INSTITUTION
	ADDRESS CITY STATE ZIP
	TELEPHONE NUMBER ()

ACCOUNT INFORMATION	TYPE OF ACCOUNT <input type="checkbox"/> SAVINGS <input type="checkbox"/> CHECKING <input type="checkbox"/> TRUST <input type="checkbox"/> CERTIFICATE OF DEPOSIT <input type="checkbox"/> OTHER _____	
	ACCOUNT BALANCE (INCLUDE INTEREST TO DATE OF DEATH)	ACCOUNT NUMBER
	ACCOUNT TITLE AS APPEARS ON SIGNATURE CARD OR CD	ORIGINAL DATE ESTABLISHED

SURVIVING JOINT OWNER INFORMATION	NAME (Last) (First) (Middle Initial)	Department of Revenue Use Only
	ADDRESS	
	CITY STATE ZIP CODE	
	RELATIONSHIP TO DECEDENT TELEPHONE NUMBER ()	
		PERCENT TAXABLE
		TAX RATE

SURVIVING JOINT OWNER INFORMATION	NAME (Last) (First) (Middle Initial)	Department of Revenue Use Only
	ADDRESS	
	CITY STATE ZIP CODE	
	RELATIONSHIP TO DECEDENT TELEPHONE NUMBER ()	
		PERCENT TAXABLE
		TAX RATE

SURVIVING JOINT OWNER INFORMATION	NAME (Last) (First) (Middle Initial)	Department of Revenue Use Only
	ADDRESS	
	CITY STATE ZIP CODE	
	RELATIONSHIP TO DECEDENT TELEPHONE NUMBER ()	
		PERCENT TAXABLE
		TAX RATE

LIST DEBTS & DEDUCTIONS BELOW

Date Paid	Payee	Description	Amount Paid

Note: Please attach to receipt Total \$ _____