



Penguin  
Random  
House

## Estate Questionnaire

Complete and email this form along with scans of supporting documentation (e.g. death certificate, will, trust, documents from probate court) to [estates@penguinrandomhouse.com](mailto:estates@penguinrandomhouse.com). Or mail hardcopies to:

Penguin Random House Legal Department  
Attn: Estates  
1745 Broadway  
New York, NY 10019

### THE DECEASED

Name (decedent): \_\_\_\_\_

Author's Name (if different from above): \_\_\_\_\_

Other Names Used by Decedent: \_\_\_\_\_

Last Address: \_\_\_\_\_

Citizenship: \_\_\_\_\_

Tax ID #: \_\_\_\_\_

Date of Death: \_\_\_\_\_

Place of Death (City/State): \_\_\_\_\_

**Provide death certificate**

## THE ESTATE

Did the decedent die with a will?

If yes:

**Provide will and all codicils**

Were there formal court proceedings (probate) held regarding the will?

If yes:

**Provide letters testamentary or letters of administration**

Name of Estate: \_\_\_\_\_

Estate Tax ID #: \_\_\_\_\_

Name of Executor/Administrator/Personal Representative:

\_\_\_\_\_

Address: \_\_\_\_\_

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

Phone #: \_\_\_\_\_

Did the deceased leave their book contracts, royalties, and/or copyrights to a trust?

If yes:

**Provide trust document and all amendments**

Name of Trust: \_\_\_\_\_

Trust Tax ID #: \_\_\_\_\_

Name of Trustee: \_\_\_\_\_

Address: \_\_\_\_\_

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

Phone #: \_\_\_\_\_

Has the estate been closed?

If yes:

Was an order of distribution issued by a probate court?

If no, provide **letter from estate representative confirming estate closure and beneficiaries**

If yes, provide **order of distribution or final accounting**

#### THE NEW PAYEE(S)

If there are more than two, provide a list including the information below for each payee.

##### Payee 1

Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

Phone #: \_\_\_\_\_

Citizenship (e.g. US): \_\_\_\_\_

% of earnings (e.g. 100% if the sole payee) \_\_\_\_\_

##### Payee 2

Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

Phone #: \_\_\_\_\_

Citizenship (e.g. US): \_\_\_\_\_

% of earnings \_\_\_\_\_

THE REQUESTOR

Name of person completing this questionnaire: \_\_\_\_\_

Relationship to Decedent: \_\_\_\_\_

Address: \_\_\_\_\_

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

Phone #: \_\_\_\_\_

I declare that, to the best of my knowledge and belief, the foregoing information is true and correct and all questions have been answered fully and completely and without any intent to deceive Penguin Random House with respect to the facts concerning the decedent, his/her estate, and/or his/her lawful heirs or beneficiaries.

\_\_\_\_\_  
[Signature]

\_\_\_\_\_  
[Print name]

\_\_\_\_\_  
[Date]