4.0 SAFE DEPOSIT BOX

4.01	Did D maintain or have access to one or more safe deposit boxes, either alone or with another person? Yes No If no, skip the rest of this Section 4.0. If yes, complete Items 4.02 through 4.14 with respect to each safe deposit box.
4.02	Name of institution
4.03	Address
4.04	City, state, zip
4.05	Phone number
4.06	Officer to contact
4.07	Box number
4.08	Name of joint holder/depositor
4.09	Address of joint holder/depositor
4.10	City, state, zip
4.11	Phone number
4.11A	Fax number
4.11B	E-mail
4.12	Relationship to D
4.13	Court order needed for entry? \square Yes \square No If no, skip to Item 4.19. If yes, complete Items 4.14 through 4.18B.
4.14	Contents of box
4.15	Name of person filing motion to open safe deposit box
4.16	Address
4.17	City, state, zip
4.18	Phone number
4.18A	Fax number
4.18B	E-mail
4.19	Has inventory of box been made? ☐ Yes ☐ No
4.20	When copy of inventory has been obtained, check here \Box

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If any of the contents did not belong to D or if they will not be included in D's federal estate tax re explain
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