

ESTATE PLANNING QUESTIONNAIRE
(All information will remain confidential)

_____ (Date)

FAMILY INFORMATION

Your Name: _____ Date of Birth _____

Home Phone _____

Social Security Number: _____ Work Phone _____

Current Marital Status: Single Married Widowed
 Legally Separated Divorced

Do You Have a Pre-Marital Agreement? Yes No
 If yes, please attach a copy of the Agreement.

Spouse's Name: _____ Date of Birth _____

Home Phone _____

Social Security Number: _____ Work Phone _____

Children's Name(s) _____ Date of Birth _____

Social Security Number: _____

Date of Birth _____

_____ Social Security Number: _____

Date of Birth _____

_____ Social Security Number: _____

Date of Birth _____

_____ Social Security Number: _____

Date of Birth _____

_____ Social Security Number: _____

Grandchildren's Names (s) _____ Date of Birth _____

Date of Birth _____

Date of Birth _____

Date of Birth _____

Date of Birth _____

(Please designate which children or grandchildren, if any, are adopted, are stepchildren or are children of a prior marriage.)

Your Living Parents: _____

Spouse's Living Parents: _____

GENERAL INFORMATION

Home Address: _____

City: _____ State: _____ Zip Code: _____

BUSINESS

Your Occupation _____

Active _____ Retired _____

Place of Employment: _____

Business Address: _____ Phone Number: _____

City: _____ State: _____ Zip Code: _____

Spouse's Occupation _____

Active _____ Retired _____

Place of Employment: _____

Business Address: _____ Phone Number: _____

City: _____ State: _____ Zip Code: _____

PROFESSIONAL ADVISORS

Accountant: _____ Phone Number: _____

Life Insurance Agent: _____ Phone Number: _____

Stock Broker/
Investment Advisor: _____ Phone Number: _____

Other Advisor: _____ Phone Number: _____

Other Advisor: _____ Phone Number: _____

LOCATION AND NUMBER OF SAFE DEPOSIT BOX(ES)

Bank Name: _____

Address: _____

Box No.: _____

YOUR PERSONAL INFORMATION

Citizenship: _____ State of Residency: _____

Other State in Which You Maintain a Residence: _____

Prior Marriage(s), if any:

Name of Former Spouse(s): _____

Place of Divorce or Death: _____

Date: _____

SPOUSE’S PERSONAL INFORMATION

Citizenship: _____ State of Residency: _____

Other State in Which You Maintain a Residence: _____

Prior Marriage(s), if any:

Name of Former Spouse(s): _____

Place of Divorce or Death: _____

Date: _____

Have you and/or your spouse ever filed gift tax returns? Yes _____ No _____

Are you and/or your spouse interested in making charitable gifts during your lifetime or at your death? Yes _____ No _____

MISCELLANEOUS

Do you and/or your spouse currently have Wills? Yes _____ No _____

Do you and/or your spouse currently have Trusts? Yes _____ No _____

Are there persons other than your children or grandchildren who you would like to provide for under your Will? Yes _____ No _____

If yes, please provide the names, addresses, and relationship of those persons to you:

Do you have children or other family members with special needs? Yes _____ No _____

If yes, please explain _____

Will your spouse need management assistance in connection with the investment of liquid assets after your death? Yes _____ No _____

If both you and your spouse are deceased, at what ages do you want your children to receive their share of your respective estates? _____

If you, your spouse, and all your children and other lineal descendants are deceased, to who do you wish to have your estate distributed?

Relatives: _____

Charitable Organizations: _____

Other: _____

Do you and/or your spouse wish to consider arrangements for the management of assets during your lifetime in the event of incapacity? Yes _____ No _____

FINANCIAL STATEMENT

| <u>Assets</u> | | | <u>Liabilities</u> |
|--------------------------------------|----------------|-------------|--------------------|
| <u>Joint</u> | <u>Husband</u> | <u>Wife</u> | |
| HOME: | _____ | _____ | _____ |
| Other real estate: | _____ | _____ | _____ |
| | _____ | _____ | _____ |
| Bank Accounts: | _____ | _____ | _____ |
| | _____ | _____ | _____ |
| Securities: | _____ | _____ | _____ |
| | _____ | _____ | _____ |
| Business interest (corp, LLC, etc.): | _____ | _____ | _____ |
| \$ Owed to You: | _____ | _____ | _____ |
| Special assets: | _____ | _____ | _____ |
| | _____ | _____ | _____ |
| RETIREMENT BENEFITS: | _____ | _____ | _____ |
| (Husband) | _____ | _____ | _____ |
| | _____ | _____ | _____ |
| (Wife) | _____ | _____ | _____ |
| | _____ | _____ | _____ |
| | _____ | _____ | _____ |

EST. NET WORTH:

Questions? _____