



CONFIDENTIAL

Estate Planning Information Questionnaire

Existing Will: **Yes** **No**

Date:

Name:
Social Security No.:
Date of Birth:
Citizenship:

Name:
Social Security No.:
Date of Birth:
Citizenship:

Home Address:
City:
State:
County:
Home Telephone No.:

Home Address:
City:
State:
County:
Home Telephone No.:

Employer:
Office Telephone No.:
Email Address:

Employer:
Office Telephone No.:
Email Address:

Children and Dependents

	Name	Relationship	Address	Date of Birth
1.				
2.				
3.				
4.				
5.				
6.				

Asset Summary

Tangible Personal Property (Indicate estimated total present value of the following categories of property)

<u>Automobiles, Boats, etc.</u>		
	Item	Amount
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		

<u>Jewelry</u>		
	Item	Amount
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

Household Furniture and Furnishings

	Item	Amount
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

Art, Antiques, etc.
(Identify and estimate value)

	Item	Value
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

Real Estate

	Address	Date Acquired	Name(s) on Deeds	Cost	Estimated Market Value	Principle Balance on Mortgage
1.						
2.						
3.						
4.						
5.						

Life Insurance

	Company	Person Insured	Policy Owner	Type of Insurance	Face Amount	Beneficiary
1.						
2.						
3.						

Stocks & Bonds

Total approximate market value of those securities owned

In Husband's name alone: \$ _____

In Wife's name alone: \$ _____

In Joint names – Husband and Wife: \$ _____

Other registration (specify): _____

Indicate whether any of the above securities are closely-held or otherwise not readily marketable. Please list any stock options owned on reverse side.

Bank Accounts, CD's, Money Market Accounts

	Bank	Title of Account Husband, Wife, Joint, Other	Approximate Balance
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

¹ Indicate whether policy is a whole life (w), term life (t) or Universal (u) policy.

IRA's/Retirement Account

	Bank or Contingent Investment Firm	Title of Account (Husband or Wife)	Approximate Balance	Beneficiary
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

Business Interests

List any partnership interest or sole proprietorship, profit-sharing or pension plan interests, self-employed retirement account or deferred compensation arrangement and approximate value. If you work for a firm which provides employee benefits, please bring a copy of your firm's description of these benefits.

Future Inheritance

Note any potential inheritances of either spouse.

Interests in Estates or Trusts

Note any interests either spouse has in any estate or trust. Copies of any wills or deeds of trust governing such interests must be reviewed.

Outstanding Liabilities

(List any major debts, other than mortgages already noted, life insurance policy loans)

	Item	Amount
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

Personal Information

Name and address of proposed Guardian(s) to supervise the upbringing of minor children:

Proposed Guardian(s)

Name:

Address:

Substitute Guardian(s)

Name:

Address

Prior Marriages

(Property settlement agreements should be reviewed)

Safe Deposit Boxes

	Rented in Name(s)	Bank/Branch
1.		
2.		
3.		
4.		
5.		

Burial Instructions

Persons who will be named in the Will

	Name	Address
1.		
2.		
3.		
4.		
5.		

It may be helpful to consider the following questions before meeting for discussion (No answer is necessary on the questionnaire)

1. At what ages should children receive substantial assets outright? (Different fractions can be distributed at different; e.g., one-third at each of ages 25, 30, and 35)

2. Who should inherit if you are survived by neither spouse nor children?

3. Who should be executor (to settle the estate) or trustee (to administer continuing trusts)? Should a bank or trust company be considered for these duties?

4. Do you have any beneficiaries with physical or mental disabilities which may require specific planning?

5. Do have any particular questions for our meeting?