

Return to: \_\_\_\_\_  
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**ESTATE PLANNING INFORMATION AS OF** \_\_\_\_\_, \_\_\_\_\_

**REFERRED BY:** \_\_\_\_\_

The most useful estate plan considers complete and accurate information. In order to create the estate plan that can best suit you, help us establish an organized file, reduce the time spent obtaining background information, and attempt to minimize the cost, we recommend that you complete this form. We will rely on the information provided by you. Our advice may be inappropriate if it is based on incomplete or inaccurate information.

**A. GENERAL INFORMATION ABOUT YOU**

1. Full Name \_\_\_\_\_
2. Preferred Greeting Name \_\_\_\_\_
3. Home Address: Street Address \_\_\_\_\_  
P. O. Box \_\_\_\_\_  
City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip: \_\_\_\_\_
4. Home Phone \_\_\_\_\_
5. Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_
6. Citizenship \_\_\_\_\_
7. Social Security No. \_\_\_\_\_
8. Occupation \_\_\_\_\_
9. Employer \_\_\_\_\_
10. Business Phone \_\_\_\_\_
11. E-mail address, if permissible for communicating with you \_\_\_\_\_

12. Any Prior Marriages? Yes \_\_\_\_\_ No \_\_\_\_\_
13. Physician \_\_\_\_\_
14. Accountant \_\_\_\_\_
15. Insurance Agent \_\_\_\_\_
16. Investment Advisor \_\_\_\_\_
17. Financial Planner \_\_\_\_\_
18. Other Advisor(s) \_\_\_\_\_

**B. GENERAL INFORMATION ABOUT YOUR CHILDREN, GRANDCHILDREN AND YOUR PARENTS**

Your children:

Full Name(s)	Date of Birth	Address
_____	_____	_____
_____	_____	_____
_____	_____	_____

Do any of your children have any special needs? If so, please explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Your Grandchildren:

Full Name(s)	Age	Child of	Address
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Do any of your grandchildren have any special needs? If so, please explain:\_\_\_\_\_

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Do any of your children/grandchildren have custodial accounts? \_\_\_\_\_

Your Parents:

Full Name(s)	Age	Address	Estimated Amount of Any Inheritance Expectancy
_____	_____	_____	_____
_____	_____	_____	_____

**C. FINANCIAL INFORMATION**

ASSETS

<u>Cash:</u>	
Checking	\$ _____
Savings	\$ _____
Money Market	\$ _____
CD's	\$ _____
<u>Publicly Traded Securities:</u>	
Stocks	\$ _____
Bonds	\$ _____
Mutual Funds	\$ _____

Closely Held Businesses  
(Corps, Partnerships)

Name & % Owned

1. _____	_____ %	\$ _____
2. _____	_____ %	\$ _____
3. _____	_____ %	\$ _____

Real Estate:

Personal Residence      \$ \_\_\_\_\_

Other (Describe):

1. _____	\$ _____
2. _____	\$ _____
3. _____	\$ _____

Retirement Plans

IRA                              \$ \_\_\_\_\_      (Benef. \_\_\_\_\_)

Profit Sharing                \$ \_\_\_\_\_      (Benef. \_\_\_\_\_)

Pension                        \$ \_\_\_\_\_      (Benef. \_\_\_\_\_)

Miscellaneous Assets:

Notes/Mortgages  
Payable to You              \$ \_\_\_\_\_

Cash Value Life  
Insurance                      \$ \_\_\_\_\_

Personal Property  
(Cars, Jewelry,  
Furniture, etc.)              \$ \_\_\_\_\_

Other (Describe)  
\_\_\_\_\_                        \$ \_\_\_\_\_

TOTAL ASSETS                \$ \_\_\_\_\_

## LIABILITIES

Short Term:

Credit Cards \$ \_\_\_\_\_

Banks \$ \_\_\_\_\_

Miscellaneous \$ \_\_\_\_\_

Long-Term:

Real Estate Mortgages:

Residence \$ \_\_\_\_\_

Other Real Estate \$ \_\_\_\_\_

Other \$ \_\_\_\_\_

**TOTAL LIABILITIES** \$ \_\_\_\_\_

**NET WORTH** \$ \_\_\_\_\_

**ANNUAL INCOME**

Salary/Bonuses \$ \_\_\_\_\_

Investments/  
Interest &  
Dividends \$ \_\_\_\_\_

Other Income \$ \_\_\_\_\_

**TOTAL ANNUAL INCOME** \$ \_\_\_\_\_

**D. LIFE INSURANCE SUMMARY**

Insurance Company _____	Type (Whole Life, Term, etc.) _____	Face Amount _____	Owner _____	Beneficiary _____	Cash Surrender Value _____	Loans Against Policy _____
A. _____	_____	\$ _____	_____	_____	\$ _____	\$ _____
B. _____	_____	\$ _____	_____	_____	\$ _____	\$ _____
C. _____	_____	\$ _____	_____	_____	\$ _____	\$ _____
D. _____	_____	\$ _____	_____	_____	\$ _____	\$ _____
E. _____	_____	\$ _____	_____	_____	\$ _____	\$ _____

**E. MATTERS TO CONSIDER BEFORE INITIAL ESTATE PLANNING CONFERENCE**

1. Who are the primary beneficiaries of your estate (children, other family members, charities, etc.)?

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2. Who are the secondary beneficiaries of your estate (should primary beneficiaries not survive you)?

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3. Who are the remote beneficiaries of your estate if neither the primary beneficiaries nor the secondary beneficiaries survive you (charities, more distant family members)?

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4. Would you like to leave any assets at your death to charity? Yes \_\_\_\_\_ No\_\_\_\_\_

If yes, please name charity or charities and amounts or percentages:

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5. If the other parent of your minor children (under age 19) does not survive you, who should be named as guardian of the minor children?

Initial Guardian: \_\_\_\_\_

Successor Guardian: \_\_\_\_\_

6. At what age and in what percentages should a child receive an inheritance (i.e., all at age 30, or 1/3 increments at ages 25, 30 & 35, etc.)? Mandatory distributions occur at the selected ages. Until then, assets are managed for benefit of child and used for health, support and education.

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7. Who should manage a child's inheritance (i.e., trustee) after both parents are gone (family member, institution, other advisor)? Can be same as guardian or different.

Initial Trustee: \_\_\_\_\_

First Successor Trustee: \_\_\_\_\_

Second Successor Trustee: \_\_\_\_\_

8. Who should manage your estate (i.e., executor) after you are gone (family member, institution, other advisor)?

Initial Executor: \_\_\_\_\_

First Successor Executor: \_\_\_\_\_

Second Successor Executor: \_\_\_\_\_

9. Are you currently a defendant in a lawsuit or do you expect to be sued? If so, please elaborate.

\_\_\_\_\_  
\_\_\_\_\_

**F. ADDITIONAL INFORMATION**

Please list below any information which would not fit on the preceding pages. Please reference the section to which the information relates.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list below any additional information not requested which you feel is important.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**G. DOCUMENTS TO BRING TO THE INITIAL CONFERENCE**

Present Will

Deeds to Real Property

Gift Tax Returns (Form 709)

Pre or Post-Nuptial Agreements and Divorce Decrees/Property Settlements

Trust Documents - created by you or by others for your (or your family's) benefit

Personal Income Tax Return (Form 1040)

Business Tax Returns (Partnership or Corporation)

Business Buy-Sell Agreements, Partnership Agreements, Corporate Minute Books

Employment Contracts

Split Dollar Agreements

Summary Plan Description or Plan Document for Qualified Retirement Plans in excess of \$100,000