Estate Planning Questionnaire

Husband______________________________ **Wife**__________________________________

SS#____________________________________ **SS#**____________________________________

Home Address______________________________

____

____

Other Address______________________________

____

____

Telephone Number____________________________

Home Fax Number ____________________________

Employer_______________________________ **Employer**_______________________________

Job_____________________________________ **Job**_____________________________________

Position________________________________ **Position**________________________________

Work Address____________________________ **Work Address**____________________________

____ ____

____ ____

Work Number_____________________________ **Work Number**_____________________________

Work Fax Number_________________________ **Work Fax Number**_________________________

Birthdate_______________________________ **Birthdate**_______________________________

Birthplace______________________________ **Birthplace**______________________________

Citizenship_____________________________ **Citizenship**_____________________________

CHILDREN:

Name	Address	Birthdate	Spouse (if married)
1)			
2)			
3)			
4)			
5)			

GRANDCHILDREN:

Name	Address	Parent #	Birthdate	Spouse (if married)

Do any children/grandchildren require special attention or special treatment?

Any other to benefit from the estate.

Name	Address	Birthdate	Relationship

ASSETS AND LIABILITIES

1. CASH, CDs AND BANK BALANCES:

Bank	Account #	Type of Account	How title held	Balance

2. BROKERAGE ACCOUNTS / MUTUAL FUNDS (NON QUALIFIED):

Where Held	In Whose Name	When Begun	Value

3. INDIVIDUAL STOCK HOLDINGS:

Company Or Issuer	Type (Common, Preferred)	#of Shares or face Value	How Title Held	Cost	Market Value

4. PERSONAL EFFECTS – (VEHICLES, JEWELRY, ANTIQUES, ETC.):

Description	Owner	Value

5. IRA, KEOGH, &/OR OTHER RETIREMENT PLANS:

Where Held	In Whose Name	When Begun	Amount

6. LIFE, DISABILITY, ACCIDENT INSURANCE & ANNUITIES:

Description (Co. & Type of Contract)	Policy Number	Owner	Primary and Cntgnt. Benef.	Present Cash Value	Face Amt. Of Death Benefit

7. MORTGAGES, NOTES AND OTHER RECEIVABLES:

Description	Owner	Amount	Term

8. BUSINESS INTERESTS:

Business Name	Type of Annuity	Ownership %	Value	Agreement

9. REAL ESTATE:

Description Location	Title Held	Cost/ Basis	Encumbrances	Market Value

Principal Residence:

Other Real Estate:

10. OTHER ASSETS – (INCLUDE ON THESE LINES ANY ANTICIPATED INHERITANCE, GIFT OR LAWSUIT JUDGMENT)

ADDITIONAL INFORMATION TO BE BROUGHT TO INTERVIEW OR TO BE ATTACHED TO THIS FORM:

A. Copies of present Wills of Husband and Wife
B. Prior gift tax returns, if any
C. Last Federal income tax return
D Copies of trust agreements in which you or your spouse are donor or beneficiary
E. Buy and Sell agreements; other agreements concerning business interests
F. Divorce decrees, if any
G. Antenuptial or other marital agreements