STEP 1

SIMPLE BACKGROUND INFORMATION

The information you provide in this section provides us with important objective information about you. your age. marital status. where you live. and how best to communicate with you.

Client Information:

INITIAL APPOINTMENT: _____

Full Legal Name: _____ Preferred Name: _____
(as it appears on Social Security card)

Also known as: _____ DOB: _____ SSN: _____ - ____ - _____
(as it appears on titles or accounts)

Physical Address: _____ County _____ State ____ Zip _____

Mailing Address if other: _____ State _____ Zip Code _____

Phone Number: (Cell) _____ (Home) _____

Email: _____ U.S. Citizen: ___ Y ___ N Veteran: ___ Y ___ N Disabled: ___ Y ___ N

Marital Status: __ Single __ Married __ Divorced __ Widow Pre-nuptial Agreement? __ Y __ N Date of marriage: _____

Spouse Information:

Full Legal Name: _____ Preferred Name: _____
(as it appears on Social Security card)

Also known as: _____ DOB: _____ SSN: _____ - ____ - _____
(as it appears on titles or accounts)

Physical Address: _____ County _____ State ____ Zip _____

Mailing Address if other: _____ State _____ Zip Code _____

Phone Number: (Cell) _____ (Home) _____

Email: _____ U.S. Citizen: ___ Y ___ N Veteran: ___ Y ___ N Disabled: ___ Y ___ N

Marital Status: __ Single __ Married __ Divorced __ Widow Pre-nuptial Agreement? __ Y __ N Date of marriage: _____

STEP 2	POTENTIAL "INDIVIDUAL" BENEFICIARIES Identify all living and deceased children and grandchildren. Also identify other individuals who you may wish to be a beneficiary of your estate. Please use full legal names, and provide mailing address and best phone number for contacting, indicating (c) when cell phone. Complete contact information is required.

Circle Your Answers

Does any potential beneficiary have special educational, medical or physical needs, or receive governmental benefits? Yes No

Does any potential beneficiary have any potential problems with drug or alcohol abuse? Yes No

Are you concerned with any potential beneficiary's ability to handle/manage money? Yes No

Are you concerned with your children's ability to get along with one another? Yes No

Are there problems/concerns relative to your relationship with your children (or spouse's children)? Yes No

Full Legal Name: ______________________________ Child of: ____ Husband ____ Wife ____ Both

Preferred Name: ______________________ DOB: _______ Adopted? ___ Y ___N Disabled? ___ Y ___ N Deceased? ___ Y ___ N

Mailing Address: ______________________________ State ___________ Zip Code ____________

Phone Number: ______________________ Email: ______________________________

Marital Status: ____ Single _____ Married _____ Divorced ____ Widow Spouse Full Name: ______________________

Children's Names and Ages: ____

____

Full Legal Name: ______________________________ Child of: ____ Husband ____ Wife ____ Both

Preferred Name: ______________________ DOB: _______ Adopted? ___ Y ___N Disabled? ___ Y ___ N Deceased? ___ Y ___ N

Mailing Address: ______________________________ State _____ Zip Code _____________

Phone Number: ______________________ Email: ______________________________

Marital Status: ____ Single _____ Married _____ Divorced ____ Widow Spouse Full Name: ______________________

Children's Names and Ages: ____

____

Full Legal Name: ______________________________ Child of: ____ Husband ____ Wife ____ Both

Preferred Name: ______________________ DOB: _______ Adopted? ___ Y ___N Disabled? ___ Y ___ N Deceased? ___ Y ___ N

Mailing Address: ______________________________ State _____ Zip Code _____________

Phone Number: ______________________ Email: ______________________________

Marital Status: ____ Single _____ Married _____ Divorced ____ Widow Spouse Full Name: ______________________

Children's Names and Ages: ____

____

Names of Charitable Beneficiaries: ____

____

____

STEP 3	APPOINTMENTS-PEOPLE TO ASSIST YOU One of the most important aspects of any estate plan is the "appointment" of various persons to assist you in times of need - particularly when death or disability strikes. These appointed "helpers" are called by different names depending on the type of estate plan you elect to implement.

Successors to You and Your Spouse

Who will serve as **guardian** for your minor children (if any)?

		Client's Response	Spouse's Response
Guardian	First Choice		
	Second Choice		
	Third Choice		

If you were incapacitated for any period of time, who would handle your **financial affairs**?

		Client's Response	Spouse's Response
Financial Agent	First Choice		
	Second Choice		
	Third Choice		

If you were (both) incapacitated for any period of time, who would make **health care decisions** for you?

		Client's Response	Spouse's Response
Health Care Agent	First Choice		
	Second Choice		
	Third Choice		

If you were (both) deceased, who would **administrate and distribute** your estate?

		Client's Response	Spouse's Response
Estate Fiduciary	First Choice		
	Second Choice		
	Third Choice		

STEP 4	WHO IS TO INHERIT YOUR ESTATE? Who do you want to get your "stuff" and how do you want it distributed – along blood lines or among beneficiaries – in shares, cash or kind? These choices are necessary to an estate plan that meets your needs, achieves your goals and preserves your legacy.

Are you disinheriting anyone? ___ Y ___ N If so, who? _____

1. Beneficiary Name: _____

Relationship to you: _____ **How much? ____ % and or $** _____

If Beneficiary 1 dies before you, who is to receive his/her share? _____

_____

2. Beneficiary Name: _____

Relationship to you: _____ **How much? ____ % and or $** _____

If Beneficiary 2 dies before you, who is to receive his/her share? _____

_____

Specific property? _____

3. Beneficiary Name: _____

Relationship to you: _____ **How much? ____ % and or $** _____

If Beneficiary 3 dies before you, who is to receive his/her share? _____

_____

Specific property? _____

4. Beneficiary Name: _____

Relationship to you: _____ **How much? ____ % and or $** _____

If Beneficiary 4 dies before you, who is to receive his/her share? _____

_____

Specific property? _____

STEP 5

ASSET ASSESSMENT

Determining the ownership, value and character of your assets is important to your estate and legacy plan. The title "ownership" is important for tax and transfer matters. The "value" will be significant in determining potential tax liability. The "character" is relevant in assessing the manner by which the asset can transfer and or be protected.

	CLIENT		SPOUSE		JOINT	
ASSETS	# of Assets	Total Value	# of Assets	Total Value	# of Assets	Total Value
INCOME; Social Security						
Wages						
Investments						
Pension						
CASH ACCOUNTS (Savings, checking, CD, Money Market)						
BROKERAGE ACCOUNTS						
BONDS						
STOCKS						
COMPANY STOCK OPTIONS						
RETIREMENT PLANS (401k, IRA, etc.)						
PENSION PLANS						
LIFE INSURANCE POLICIES (Death Benefit & Cash Value)						
ANNUITIES						
PERSONAL RESIDENCE						
OTHER REAL ESTATE						
PARTNERSHIP/LLC INTEREST						
CORPORATE INTEREST						
FARM & RANCH INTEREST						
REGISTERED VEHICLES						
PERSONAL PROPERTY (Jewelry, art, household items)						
OTHER ASSETS						
TOTAL						

STEP 6	ABOUT YOUR GOALS & OBJECTIVES Before we meet, it is important for us to understand what prompted you to schedule this appointment. Don't focus on the tools we can use, but rather on the outcomes you want to achieve.

GOALS	**CONSEQUENCES IF GOAL IS NOT ACHIEVED**
1.	
2.	
3.	
4.	
5.	

Affirmation: The undersigned hereby states and affirms that the information contained in this Confidential Estate Planning Questionnaire is an accurate and complete record of all assets and account information, and that the Estate & Elder Law Planning Practice of Mitch Cash (the "Firm") will be relying on this information in its preparation and counseling in regard to estate planning. If the undersigned becomes a Client of the Firm, and finds any information that would render the answers provided herein to be inaccurate or incomplete, the Client will inform the Firm within ten (10) days of such information.

CLIENT: _____ DATE: _____

CLIENT: _____ DATE: _____

Additional Documentation

General Document Request: In some instances, it is necessary for us to review to review other documents before we can make recommendations for your estate plan. If possible, please bring with you to the initial interview the following:

1. Existing Wills, Trusts, Powers of Attorney, Health Care Proxy, Living Wills and the like.
2. Deeds to real estate owned by you or in which you have an interest.
3. Most recent statements evidencing your ownership of bank accounts, investment accounts, retirement accounts and annuities.
4. Stock or bond certificates.
5. Pre- or Post-Nuptial Agreement.
6. Long-term Care Policy
7. Divorce Decree or Property Settlement Agreement under which continued obligations exist.