



Estate Planning Client Information Sheet

Please note: The Attorney will use the information on this form as a guide for giving estate planning advice. Estate Planning involves planning how your assets will pass to your intended beneficiaries. In order to receive the best advice, it may be necessary to share the types and amount of assets you own with the attorney. Any information shared with our office will be kept strictly confidential.

Legal Name: _____
(First) (M.I.) (Last)

Other Names Used: _____

Address: _____

County: _____ E-Mail: _____

Telephone: _____
Circle: (Home/ Work/ Cell) Circle: (Home/ Work/ Cell)

Date of Birth: _____ SSN: _____

Marital Status: Never Married Divorced Widowed Married

If Married, full name of Spouse: _____

Are you and your spouse both US Citizens? If not, what nationality? _____

CHILDREN:	Age or DOB	Is Your Spouse the parent of your child?	
		Yes	No
_____	_____		
_____	_____		
_____	_____		
_____	_____		
_____	_____		

Number of Grandchildren: _____
Any deceased children? Yes No

Ranges of Ages: _____
If Yes, name: _____
Did he/she have children? Yes No

STEP-CHILDREN: _____
Age or DOB _____

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Questions:	Circle One	Comments
Do any of your beneficiaries have special needs of any kind?	Yes No	
Are you concerned that a beneficiary has a problem with a spouse, drugs, alcohol, or handling money?	Yes No	
Do you wish to disinherit any of your children, grandchildren, or other close relative?	Yes No	
If a named beneficiary dies before you, do you want the assets to go to that beneficiary's child/children?	Yes No	
Do you want assets passing to your beneficiaries to be held in a trust until a specific age?	Yes No	
Do you expect to inherit substantial assets (\$100,000+)?	Yes No	
Do you have an existing will?	Yes No	
Have you ever executed a trust?	Yes No	
Have you ever filed a Federal Gift Tax Return?	Yes No	
Do you currently hold any assets Jointly with another person?	Yes No	

Question:	Full Name of Individual(s)
During your life, who do you want making financial and healthcare decisions on your behalf?	
After you pass, who will be your personal representative/ executor of your estate?	
Who will raise your minor child (if applicable)?	

In general, how do you want your estate distributed?

What is your goal for your appointment with the attorney?

General Estate Planning- Will, Power of Attorney, Living Will, Etc.

Find out if I need a trust

Protect my assets from the cost of Long Term Care or other Medical Expenses

Avoid Probate and Costly Attorney/Administration fees at my death

Other

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Please Complete this Chart with the Type and Estimated Value of Your Assets:

Resource Description	Acct. Type	Joint Owner or Beneficiary	Value
<u>BANK ACCOUNTS and CDs</u>			
<u>INVESTMENTS (Non-Qual.) (Stocks, Bonds, Mutual Funds, Other)</u>			
<u>LIFE INSURANCE and ANNUITIES</u> – Death Benefit			Cash Surrender Value
<u>REAL ESTATE</u>			
	Mortgage/Loan bal.		Fair Market Value
<u>VEHICLE(S) (autos, R.V., boat, etc)</u>			
	Loan Balance		Fair Market Value
<u>PREPAID FUNERAL and/or CEMETERY PLOT</u>			
			n/a
<u>TOTAL NON QUALIFIED</u>			\$
<u>QUALIFIED FUNDS (pre-tax funds- Retirement Accts)</u>			
<u>TOTAL QUALIFIED FUNDS</u>			\$
TOTAL AVAILABLE RESOURCES			\$

If you have Long Term Care Insurance or Annuities, please bring the policies with you to the consultation.