**Estate Planning Information**

Today’s Date:

**Personal Information**

|  |  |  |  |
| --- | --- | --- | --- |
| **Your Name:**  (First, Middle, Last) |  | | |
| **Home Address:** |  | | |
| **City/State:** |  | **Zip Code:** |  |
| **Home Phone:** |  | **Work Phone:** |  |
| **Cell Phone:** |  | **Birth Date:** |  |
| **Email Address:** |  | **Marital Status:** |  |
| **Employer:** |  | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Spouse, Partner, or Significant Other:**  (First, Middle, Last) | |  | | |
| **Home Address:** |  | | | |
| **City/State:** |  | | **Zip Code:** |  |
| **Home Phone:** |  | | **Work Phone:** |  |
| **Cell Phone:** |  | | **Birth Date:** |  |
| **Email Address:** |  | | **Marital Status:** |  |
| **Employer:** |  | | | |

**Children**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name:**  (First, Middle, Last) |  | | | |
| **Son/ Daughter of  Wife/ Husband/ Both** (Please Check Boxes) | | | | |
| **Home Address:** |  | | | |
| **City/State:** |  | | **Zip Code:** |  |
| **Home Phone:** |  | | **Work Phone:** |  |
| **Cell Phone:** |  | | **Birth Date:** |  |
| **Email Address:** |  | | **Marital Status:** |  |
| **No. of Children:** |  | |  |  |
| **Names of Child’s Children:** | |  | | |
| **Spouse, Partner, or Significant Other:**  (First, Middle, Last) | |  | | |

To add additional sections, mouse over this section, click to highlight, then click the blue “+” in the lower right-hand corner.

|  |  |
| --- | --- |
| **Do any of your children have special needs?**  **If yes, please describe.** |  |

**Deceased Children**

*Please provide information regarding deceased children, if any.*

|  |  |
| --- | --- |
| **Name:**  (First, Middle, Last) |  |
| **Son/ Daughter of  Wife/ Husband/ Both** (Please Check Boxes) | |
| **Is this person survived by children? Yes  No** | |

To add additional sections, mouse over this section, click to highlight, then click the blue “+” in the lower right-hand corner.

**Parents/Siblings**

*Please provide information regarding your parents and siblings.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Name:**  (First, Middle, Last) |  | | |
| **Relationship:** |  | | |
| **Home Address:** |  | | |
| **City/State:** |  | **Zip Code:** |  |
| **Home Phone:** |  | **Email Address:** |  |
| **Name:**  (First, Middle, Last) |  | | |
| **Relationship:** |  | | |
| **Home Address:** |  | | |
| **City/State:** |  | **Zip Code:** |  |
| **Home Phone:** |  | **Email Address:** |  |
| **Name:**  (First, Middle, Last) |  | | |
| **Relationship:** |  | | |
| **Home Address:** |  | | |
| **City/State:** |  | **Zip Code:** |  |
| **Home Phone:** |  | **Email Address:** |  |
| **Name:**  (First, Middle, Last) |  | | |
| **Relationship:** |  | | |
| **Home Address:** |  | | |
| **City/State:** |  | **Zip Code:** |  |
| **Home Phone:** |  | **Email Address:** |  |

To add additional sections, mouse over this section, click to highlight, then click the blue “+” in the lower right-hand corner.

**Assets and Liabilities**

|  |  |
| --- | --- |
| **What is the estimated value of your estate?** |  |
| **Do you have a safety deposit box?  If yes, where is it located?** |  |

|  |  |
| --- | --- |
| **Real Estate:** |  |
| **Property Address:** |  |
| **Ownership:**  (Please indicate if jointly held) |  |
| **Mortgage Balance:** |  |
| **Purchase Price:** |  |
| **Value:** |  |
| **Real Estate:** |  |
| **Property Address:** |  |
| **Ownership:**  (Please indicate if jointly held) |  |
| **Mortgage Balance:** |  |
| **Purchase Price:** |  |
| **Value:** |  |

To add additional sections, mouse over this section, click to highlight, then click the blue “+” in the lower right-hand corner.

**Bank accounts**

|  |  |
| --- | --- |
| **Financial Institution:** |  |
| **Account No.:**  (Last 4-digits) |  |
| **Type of Account:** |  |
| **Ownership:** |  |
| **Value:** |  |
| **Financial Institution:** |  |
| **Account No.:**  (Last 4-digits) |  |
| **Type of Account:** |  |
| **Ownership:** |  |
| **Value:** |  |

To add additional sections, mouse over this section, click to highlight, then click the blue “+” in the lower right-hand corner.

**Investment and retirement account**

*Please include tax deferred accounts, life insurance and annuities.*

|  |  |
| --- | --- |
| **Financial Institution:** |  |
| **Account No.:**  (Last 4-digits) |  |
| **Type of Account:** |  |
| **Ownership:**  (Please indicate if jointly held or payable on death) |  |
| **Value:** |  |
| **Financial Institution:** |  |
| **Account No.:**  (Last 4-digits) |  |
| **Type of Account:** |  |
| **Ownership:**  (Please indicate if jointly held or payable on death) |  |
| **Value:** |  |

To add additional sections, mouse over this section, click to highlight, then click the blue “+” in the lower right-hand corner.

**Other Securities (Non-Retirement)**

*Please list any bonds, mutual funds, stocks, or other securities that you own and that have not already been included in the accounts listed above.*

|  |  |
| --- | --- |
| **Company/Issuer:** |  |
| **Quantity:** |  |
| **Ownership:**  (Please indicate joint owner or payable on death beneficiary) |  |
| **Value:** |  |
| **Company/Issuer:** |  |
| **Quantity:** |  |
| **Ownership:**  (Please indicate joint owner or payable on death beneficiary) |  |
| **Value:** |  |

To add additional sections, mouse over this section, click to highlight, then click the blue “+” in the lower right-hand corner.

**life insurance/annuities**

|  |  |
| --- | --- |
| **Company:** |  |
| **Owner/Insured:** |  |
| **Beneficiary Designation:** |  |
| **Contingent Beneficiary** (if any)**:** |  |
| **Death Benefit:** |  |
| **Company:** |  |
| **Owner/Insured:** |  |
| **Beneficiary Designation:** |  |
| **Contingent Beneficiary** (if any)**:** |  |
| **Death Benefit:** |  |

To add additional sections, mouse over this section, click to highlight, then click the blue “+” in the lower right-hand corner.

**Retirement accounts**

*Please list any annuities, IRAs, profit sharing plans, Keogh plans, pension plans, or other deferred compensation arrangements.*

|  |  |
| --- | --- |
| **Retirement Account/Plan:** |  |
| **Owner:** |  |
| **Beneficiary Designation:** |  |
| **Contingent Beneficiary** (if any)**:** |  |
| **Value:** |  |

To add additional sections, mouse over this section, click to highlight, then click the blue “+” in the lower right-hand corner.

**business interests**

*Please list any interest that you have in any closely held business entity.*

|  |  |
| --- | --- |
| **Business Name and Type:**  (Corp, Pship, LLP, LLC, etc.) |  |
| **Ownership/% of Ownership:** |  |
| **Basis:** |  |
| **Buy/Sell or Other Operating Agreement:** |  |
| **Value:** |  |

To add additional sections, mouse over this section, click to highlight, then click the blue “+” in the lower right-hand corner.

**Personal Property**

*Please list any significant items of personal property, such as an automobile, boat, recreational vehicle, artwork, jewelry, collections, etc., below.*

|  |  |
| --- | --- |
| **Item:** |  |
| **Ownership:** |  |
| **Value:** |  |
| **Item:** |  |
| **Ownership:** |  |
| **Value:** |  |
| **Item:** |  |
| **Ownership:** |  |
| **Value:** |  |

To add additional sections, mouse over this section, click to highlight, then click the blue “+” in the lower right-hand corner.

|  |  |
| --- | --- |
| **Who referred you to this office?** |  |