

Please fill out this questionnaire. It is important that you answer each question fully and be as candid as possible. You should answer all questions relevant to your case. If a question does not apply to your particular situation, please indicate by marking the question "N/A." Your responses to these questions will help to organize your case and will save you money on attorney's fees in trying to gather and assemble information after the case is in progress. Since your answers are being made to an attorney, you are assured of confidentiality and are protected by the attorney-client privilege.

| (Client #1) Name: | |
|------------------------------------|--|
| (Client #2) Spouse's Name: | |
| Address: | |
| (Client #1) Your phone number: | |
| (Client #2) Spouse's phone number: | |
| Children's full names and DOBs: | |
| | |
| | |

To best prepare for you estate plan meeting, please supply us with a list of your assets.

For most families, assets include: a house, retirement accounts, brokerage accounts, bank accounts, life insurance policies, 529 plans, other private investments, cars, personal property, real property (cabin/rental home/etc.).

By supplying a list, we can assist you with beneficiary designations to help your family avoid the need to go through the probate court.

Depending upon the value of your assets, we will discuss the relevant tax treatment and distributions rules.

<u>Client #1:</u>

Personal Representative: the person who you nominate to be responsible for administering your estate.

1. If your spouse is unable to act as your personal representative, who do you nominate and what is their relationship to you (i.e., sister, daughter, sister-in-law)?

Name: _____

Address: _____

2. If the individual named above is unable to act, who do you nominate and what is their relationship to you (i.e., sister, daughter, sister-in-law)?

Name: _____

Address: _____

Trustee: Individuals who hold legal title of property for your beneficiaries. This could be the same as your nominated personal representative(s).

1. If your spouse is unable to act as your trustee, who do you nominate and what is their relationship to you (i.e., sister, daughter, sister-in-law)?

| Na | me: | | |
|----|---|--|--|
| Ad | dress: | | |
| 2. | If the above-named person is unable to act, who do you nominate and what is their relationship to you (i.e., sister, daughter, sister-in-law)? | | |
| Na | me: | | |
| Ad | dress: | | |
| | ealth Care Agent : An individual who makes decisions about your health care if you are able. | | |
| 1. | . If your spouse is unable to act as your health care agent, who do you nominate and what is their relationship to you (i.e., sister, daughter, sister-in-law)? | | |
| Na | me: | | |
| Ad | dress: | | |
| Ho | ome phone number: | | |
| Ce | ll phone number: | | |
| 2. | If the above-named individual is unable to act, who do you nominate and what is their relationship to you (i.e., sister, daughter, sister-in-law)? | | |
| Na | me: | | |
| Ad | dress: | | |
| Ho | ome phone number: | | |
| Ce | ll phone number: | | |
| 3. | Do you want to donate your organs, tissues, and/or other body parts?YN | | |
| 4. | Do you want to donate your body to science?YN | | |
| 5. | Do you want a burial or do you want to be cremated?YN | | |
| 6. | Do you request an autopsy be performed after your death?YN | | |
| 7. | Are there any medical procedures you will not allow?YN | | |
| | If yes, explain | | |

Power of Attorney: individual who you give the power to act for you in regards to financial and legal matters. This can be the same as your personal representative/trustee.

1. If your spouse is unable to act as your power of attorney, who do you nominate and what is their relationship to you (i.e., sister, daughter, sister-in-law)?

| Name: | |
|----------|--|
| Address: | |
| uccessor | |
| Jame: | |
| Address: | |

Client #2:

Personal Representative: the person who you nominate to be responsible for administering your estate.

1. If your spouse is unable to act as your personal representative, who do you nominate and what is their relationship to you (i.e., sister, daughter, sister-in-law)?

Name: _____

Address: _____

2. If the individual named above is unable to act, who do you nominate and what is their relationship to you (i.e., sister, daughter, sister-in-law)?

Name: _____

Address: _____

Trustee: Individuals who hold legal title of property for your beneficiaries.

1. If your spouse is unable to act as your trustee, who do you nominate and what is their relationship to you (i.e., sister, daughter, sister-in-law)?

Name: _____

Address:

2. If the above-named person is unable to act, who do you nominate and what is their relationship to you (i.e., sister, daughter, sister-in-law)?

Name: ______

Address: _____

Health Care Agent: An individual who makes decisions about your health care if you are unable.

1. If your spouse is unable to act as your health care agent, who do you nominate and what is their relationship to you (i.e., sister, daughter, sister-in-law)?

| Name: |
|--|
| Address: |
| Home phone number: |
| Cell phone number: |
| 2. If the above-named individual is unable to act, who do you nominate and what is their relationship to you (i.e., sister, daughter, sister-in-law)? |
| Name: |
| Address: |
| Home phone number: |
| Cell phone number: |
| 3. Do you want to donate your organs, tissues, and/or other body parts?YN |
| 4. Do you want to donate your body to science?YN |
| 5. Do you want a burial or do you want to be cremated?YN |
| 6. Do you request an autopsy be performed after your death?YN |
| 7. Are there any medical procedures you will not allow?YN |
| If yes, explain |
| Power of Attorney : individual who you give the power to act for you in regards to financial and legal matters. |
| 1. If your spouse is unable to act as your power of attorney, who do you nominate and what is their relationship to you (i.e., sister, daughter, sister-in-law)? |
| Name: |
| Address: |
| Successor |

| Name: | |
|----------|------|
| Address: | |