



Law office of
Elizabeth Howard

ESTATE PLANNING QUESTIONNAIRE

Please provide the following information and submit this questionnaire in advance of our initial meeting.

Date: _____

PERSONAL INFORMATION

	YOU	SPOUSE/PARTNER
LEGAL NAME:		
ANY "ALSO KNOWN AS" NAMES:		
DATE OF BIRTH:		
MAILING ADDRESS:		
HOME ADDRESS:		
COUNTY:		
PRIMARY PHONE:		
OCCUPATION:		
REFERRED BY:		
EMAIL ADDRESS:		

Can we email invoices to you? Yes No

CHILDREN (Please note any adopted or stepchildren.)

LEGAL NAME	DATE OF BIRTH	ADDRESS (if not living at home)

Do you have plans for additional natural or adopted children? Yes No

BENEFICIARIES (List any other person or institutions who might receive a gift or portion of your estate from you at your death.)

NAME	DATE OF BIRTH	ADDRESS

ASSETS (You may also bring a personal finance statement in place of this section.)

ASSETS	VALUE	OWNER
RESIDENCE:		<input type="checkbox"/> You <input type="checkbox"/> Spouse/Partner <input type="checkbox"/> Joint
ADDITIONAL REAL PROPERTY (including mineral interests):		<input type="checkbox"/> You <input type="checkbox"/> Spouse/Partner <input type="checkbox"/> Joint
BANK ACCOUNTS:		<input type="checkbox"/> You <input type="checkbox"/> Spouse/Partner <input type="checkbox"/> Joint
RETIREMENT (IRA, 401(K), etc.):		<input type="checkbox"/> You <input type="checkbox"/> Spouse/Partner <input type="checkbox"/> Joint
STOCKS & BONDS:		<input type="checkbox"/> You <input type="checkbox"/> Spouse/Partner <input type="checkbox"/> Joint
PARTNERSHIP/BUSINESS INTERESTS:		<input type="checkbox"/> You <input type="checkbox"/> Spouse/Partner <input type="checkbox"/> Joint
TANGIBLE PERSONAL PROPERTY:		<input type="checkbox"/> You <input type="checkbox"/> Spouse/Partner <input type="checkbox"/> Joint

FACE VALUE OF LIFE INSURANCE:		<input type="checkbox"/> You <input type="checkbox"/> Spouse/Partner <input type="checkbox"/> Joint
PENSION:		<input type="checkbox"/> You <input type="checkbox"/> Spouse/Partner <input type="checkbox"/> Joint
OTHER (describe asset):		<input type="checkbox"/> You <input type="checkbox"/> Spouse/Partner <input type="checkbox"/> Joint
OTHER (describe asset):		<input type="checkbox"/> You <input type="checkbox"/> Spouse/Partner <input type="checkbox"/> Joint
TOTAL ASSETS:		_____

DEBTS (You may also bring a personal finance statement in place of this section.)

DEBTS	VALUE	OWNER
MORTGAGE:		<input type="checkbox"/> You <input type="checkbox"/> Spouse/Partner <input type="checkbox"/> Joint
OTHER:		<input type="checkbox"/> You <input type="checkbox"/> Spouse/Partner <input type="checkbox"/> Joint
TOTAL DEBTS:		_____
NET WORTH (assets – debts):		_____

INSURANCE

INSURED	FACE VALUE	BENEFICIARY	OWNER	COMPANY	TERM/WHOLE

FIDUCIARIES

PERSONAL REPRESENTATIVE(S) (aka Executor): This person will collect all of your assets, pay your creditors, and make distributions to the beneficiaries of your estate.

PRIMARY: _____

SUCCESSOR: _____

GUARDIAN(S) FOR MINOR CHILDREN (if applicable): This person will take care of your minor child(ren). The primary guardian by default is almost always the child(ren)'s other parent. The person(s) you name as guardians will be backups in the event you both died.

PRIMARY: _____

SUCCESSOR: _____

TRUSTEE(S) (if applicable): This person will manage your assets and make distributions to the beneficiaries (including you) of any trusts established (e.g. for minor children, or adult children who need creditor protection, or have disabilities):

PRIMARY: _____

SUCCESSOR: _____

Will any of your choices be affected by marriage, divorce, or relocation? Yes No

OTHER CONSIDERATIONS

DO YOU PLAN TO MAKE ANY SPECIFIC BEQUESTS?

DO YOU HAVE SPECIFIC INSTRUCTIONS RELATED TO LIFE SUPPORT (Living Will) OR ORGAN DONATION (Anatomical Gift)?

DO YOU HAVE SPECIFIC INSTRUCTIONS RELATED TO BURIAL OR CREMATION?

DO YOU HAVE ANY SPECIFIC CONCERNS WITH REGARD TO YOUR ESTATE PLAN?

ANY OTHER NOTES?

Do you currently have a power of attorney in place?

Yes

No

PLEASE BRING TO YOUR MEETING

- EXISTING ESTATE PLANNING DOCUMENTS
- ANY PREMARITAL OR SEPARATION AGREEMENTS
- ANY TRUSTS IN WHICH YOU ARE A BENEFICIARY
- COPY OF DEED FOR ANY OUT-OF-STATE PROPERTY
- ANY FEDERAL GIFT TAX RETURNS