

TRUE, WALSH & MILLER, LLP

ESTATE PLANNING QUESTIONNAIRE

Please provide the following information. We don't need exact numbers for financial information, but we do need to know who owns an asset, and for retirement and life insurance, who has been named as beneficiary. Feel free to call us if you have questions about this form.

| | | |
|---------------------------------------------------------|-----------------------------------------------------|----------------------------|
| Name: | Social Security No.: | Phone (H) |
| Address: | US Citizen? ____ Yes No If not, citizenship: | Phone (W) |
| Email address: | | |
| Spouse's Name: | Social Security No.: | Phone (H) |
| Spouse's email: | US Citizen? Yes No If not, citizenship: | Phone (W) |
| | | |
| Your occupation: | Your date of birth: | Your military service: |
| Spouse's occupation: | Spouse's date of birth | Spouse's military service: |
| Have you ever been divorced? ____ Yes No ____ | If yes, list court/date of prior divorce | |
| Has your spouse ever been divorced? ____ Yes No ____ | If yes, list court/date of prior divorce | |

SHOULD BEQUESTS TO CHILDREN, GRANDCHILDREN OR OTHERS BE PUT IN TRUST?

If so, please think about what trust terms might be appropriate, such as the standards for making distributions (such as "health, education and welfare"), and the age(s) for distributing trust principal (such as 30% at age 25, and the balance at age 30). We can design trusts to accomplish your specific objectives. If you have thoughts about trust terms, please note them below. Otherwise, we can discuss this issue when we meet.

FIDUCIARIES:

| | | |
|---------------------------------|---------------------------|---------------|
| Executor: | Address (include e-mail): | Relationship: |
| Co-executor, if any: | Address: | |
| Successor Executor: | Address: | |
| Trustee: | Address: | |
| Successor Trustee: | Address: | |
| Guardian(s) for minor children: | Address: | |
| Successor Guardian: | Address: | |

FINANCIAL SUMMARY

| <u>Probate Assets</u> | Husband | Wife | Joint |
|---------------------------------------------------------------------------------------------------------------------|---------|------|-------------------------------------------------------------|
| Real property (net of mortgage) | | | |
| Vacation property (What state) | | | |
| Income Real Property | | | |
| Tangible personal property (jewelry, antiques, cars (net of car loans), boats, etc.) | | | |
| Bank accounts | | | |
| Brokerage accounts (not retirement accounts) | | | |
| Other financial assets | | | |
| Total probate assets: | 0 | 0 | 0 |
| | | | |
| <u>Non-probate Assets:</u> | | | |
| Retirement accounts - Employer sponsored | | | List beneficiary of retirement accounts and life insurance: |
| IRA's - regular | | | |
| IRA's - Roth | | | |
| Pre-tax annuities | | | |
| | | | |
| Life Insurance - employer sponsored | | | |
| Other TERM life insurance | | | |
| Other WHOLE life insurance (i.e., insurance with cash value; note amount of cash value and amount of death benefit) | | | |
| Total NON-PROBATE assets: | 0 | 0 | |
| | | | |
| Total TAXABLE assets (probate and non-probate) | 0 | 0 | 0 |

OTHER INFORMATION

1. Have you given anyone power of attorney? _____
If so, please provide a copy.

If not, do you wish to do so? _____
If so, to whom?

2. Do you want to name a Health Care Proxy (to make medical decisions in the event of incapacity)? _____

If so, to whom would you like to give your proxy?

3. If you have any other concerns or desires that we should know about, please explain below: