

ESTATE PLANNING FORM 3

Confidential Will Questionnaire

Please answer the following questions. Your answers provide a basis for discussing your specific estate plan needs and intentions. The answers will be used to draft your documents. Please answer the questions as completely as possible. If certain questions do not apply to you, please mark them as "N/A." All information supplied is strictly confidential and necessary to provide you with proper advice. We will discuss any questions you have about the requested information when we meet.

1. Your legal name: _____
2. Partner's legal name: _____
3. Do you currently have a will? [] Yes (Please have it available) [] No
4. Home address: _____
Telephone number: _____
5. Date of birth: _____
Place of birth: _____
Citizenship: _____
6. Have you been married? [] Yes [] No
If "Yes" did marriage end in [] death or [] divorce?
Year marriage ended: _____
If there was a divorce, please have a copy of the divorce decree available.
7. Do you have a domestic partnership agreement in effect? [] Yes [] No
If "Yes" please have a copy available for review.
8. Do you have any children? [] Yes [] No
(Skip to Question 9 if you have no children)
 - a. Do any of your children have special needs or are any handicapped? [] Yes [] No
 - b. Who has physical custody of the children? _____
 - c. Please list all of your children, including adopted children. Include names, city, state, and ages.

Name	City, State	DOB
_____	_____	_____
_____	_____	_____
_____	_____	_____
 - d. Please identify any children who may have predeceased you:

(Use other side if additional space is needed)

Specific Bequests of Property to Specific Persons

In many situations a person tells family members how (s)he wants the personal property divided. Generally, these items are not specifically mentioned in the will. This leaves you free to create a separate list that you may change whenever you like without having to rewrite your will. You can use the will to make a specific bequest if you are concerned your wishes will not be honored. A specific bequest may also be appropriate if you intend to leave an item to a nonfamily member.

9. Please indicate the specific item(s) you want distributed and the name of the person(s) to whom you are leaving the item(s). _____

(Use other side if additional space is needed)

10. PETS. If you have pets you may want to consider what happens to them after your death. You may want to provide that a specific individual cares for your pets. In that situation, you may want to provide a specific monetary bequest to that person for the care of the pet. _____

Beneficiaries of Your Estate

Please think about who you want to name to inherit your estate. You must also consider who will inherit the balance of your property (after the executor distributes the specific bequests, if any). Example: Do you want everything to go to your partner? If you have children, do you want to provide for them? Grandchildren? Other family members? Do you want everyone to receive equal shares?

11. Name the person(s) to whom you want to leave your estate:

Name: _____
Relationship: _____
City/State: _____
Name: _____
Relationship: _____
City/State: _____

(Use other side if additional space is needed)

12. Name the person(s) you wish to be the alternate beneficiary of your estate:

Name: _____
Relationship: _____
City/State: _____
Name: _____
Relationship: _____
City/State: _____
Name: _____
Relationship: _____
City/State: _____

(Use other side if additional space is needed)

13. GUARDIANSHIP OF MINOR CHILDREN. If you have children under the age of 18 you need to consider naming a guardian. Natural parents have priority in these matters. You can name someone to be the guardian of the person and of the estate. If you do not name a guardian, and there is no other natural parent, the probate court will appoint one for any minor child(ren).

a. First choice for guardian:

Name: _____
Relationship: _____
City/State: _____

b. Alternate choice for guardian:

Name: _____
Relationship: _____
City/State: _____

14. EXECUTOR. Every will needs an individual to act as the executor. This is the person responsible for collecting all the property at the time of death and paying all legal debts, taxes, and expenses out of the property collected. The executor is also responsible for distributing the remaining property to the people named in your will. The executor can be anyone over the age of eighteen or it can be an institution. It is advisable to name an alternate executor in case the first person is unable or unwilling to accept the responsibility. Your executor will be compensated from the estate assets according to a schedule set by [your state] law. The executor may choose to waive the fee.

a. First choice for executor:

Name: _____

Relationship: _____

City/State: _____

b. Alternate choice for executor:

Name: _____

Relationship: _____

City/State: _____

15. WILL CONTEST. Consider whether any family member is apt to file a will contest. If you think that may happen, you may want to include a provision to deter people from filing a will contest. You may provide that anyone contesting the will receives nothing from the estate. Generally, you will need to leave a specific bequest sufficient to make an heir think twice before contesting your will.

16. TAX ISSUES. In order to determine if tax planning is required for your estate it is important to estimate the overall value of your accumulated property. This includes life insurance and all property listed in your name. The 2004 exemption for federal estate tax is \$1.5 million. If your total estate is over \$1 million more extensive estate planning may be required. We will discuss the alternatives at the interview.

Estimated value of your total assets at present: (Check one)

a. Under \$1 million

b. Over \$1 million

17. Do you want to sign a durable power of attorney for finances? Yes No

a. Whom do you want to name as your attorney-in-fact (the person to whom you are giving the authority to act on your behalf)?

Name: _____

Address: _____

Telephone number: _____

Relationship: _____

b. Alternate Attorney-in-fact:

Name: _____

Address: _____

Telephone number: _____

Relationship: _____

18. Do you want to sign a health care power of attorney and living will? Yes No

a. First choice (the person designated to make health care decisions for you):

Name: _____

Address: _____

Telephone number: _____

Relationship: _____

b. Alternate choice:

Name: _____
Address: _____
Telephone number: _____
Relationship: _____

19. Do you want to execute a designation of agent? This document allows you to name someone to make decisions concerning who will visit you in a health care facility (including nursing home and hospice), disposition of personal effects, disposition of remains, and funeral arrangements. While these documents have not been tested in court, it does give you the opportunity to make your intentions known. [] Yes [] No

Assets

Generally, a will does not list each and every item of property that you want to convey following your death. However, it is important to list the *form of ownership and the approximate value of your property*. If you are unsure as to the form of ownership you can ask your insurance agent or your mortgage holder. If you are still uncertain please have the documents available and we will review them together. It is important that you complete the answers concerning the following assets as best you can.

20. a. REAL PROPERTY (e.g., residence, vacant land, rental property, vacation home). Please have your deeds available for review.

(i) Location: _____
Market value and mortgage balance: _____
Exact way owner(s) are named on deed: _____

(ii) Location: _____
Market value and mortgage balance: _____
Exact way owner(s) are named on deed: _____

(Use other side if additional space is needed)

b. BANK ACCOUNTS (Indicate whether checking, savings, brokerage account, or CDs)

Name/location of financial institution: _____
Account balance: _____
Name of account holder (specify if joint or payable on death): _____
Name/location of financial institution: _____
Account balance: _____
Name of account holder (specify if joint or payable on death): _____
Name/location of financial institution: _____
Account balance: _____
Name of account holder (specify if joint or payable on death): _____
(Use other side if additional space is needed)

c. IRAs, RETIREMENT PLANS (including 401k accounts)

Name/location of financial institution: _____
Account balance: _____
Name of account holder: _____

Name of beneficiary: _____
Name/location of financial institution: _____
Account balance: _____
Name of account holder: _____
Name of beneficiary: _____
Name/location of financial institution: _____
Account balance: _____
Name of account holder: _____
Name of beneficiary: _____
Name/location of financial institution: _____
Account balance: _____
Name of account holder: _____
Name of beneficiary: _____
(Use other side if additional space is needed)

d. STOCKS, BONDS, MUTUAL FUNDS, INCLUDING U.S. SAVINGS BONDS
Name(s) of stocks/bonds/funds: _____
How holdings are held: _____
Approximate value: _____
Name(s) of stocks/bonds/funds: _____
How holdings are held: _____
Approximate value: _____
Name(s) of stocks/bonds/funds: _____
How holdings are held: _____
Approximate value: _____
(Use other side if additional space is needed)

e. TITLED VEHICLES; list all cars, trucks, boats, and motorcycles:
Year/make/model: _____
Titled owner: _____
Approximate value: _____
Year/make/model: _____
Titled owner: _____
Approximate value: _____
(Use other side if additional space is needed)

f. OTHER IMPORTANT ASSETS (e.g., stamp/coin/other collections, business interests, partnerships, lottery winnings):

(Use other side if additional space is needed)

g. LIFE INSURANCE POLICIES
Name on policy: _____
Face value: _____
Beneficiary: _____
Name on policy: _____
Face value: _____
Beneficiary: _____
(Use other side if additional space is needed)

Please note any additional questions you want to discuss during the interview.