## **CLIENT INFORMATION FOR ESTATE PLANNING**

Today's Date:	F	Referred by:	
Please briefly describe the	nature of your estate planning	ng goals and/or conce	rns:
Name:			
Address:			County:
City:	State:	ZIP:	
Phone Numbers: Home		Cell	
E-Mail Address for private	communications:		
SS#:	Date of I	Sirth:	
Employer:			
Annual Gross Income (plea	ase list all amount(s) and sou	urce(s)):	
Marital Status: ☐ Single	☐ Married ☐ Cohabitating	☐ Divorced ☐ Wido	wed
If applicable, please list the	e other <u>adults</u> residing with yo	ou his/her relationship	to you and his/her date of birth:
If applicable, please list the Name	3	r children: Marital Status & Name of Spouse	Number of Children (your grandchildren)
If applicable, please list the	e following about each of you	r grandchildren:	
Name	Age & Sex		Parent(s) of Child (your children)
Please list and rank the pe	rson(s) you would like to adr	ninister your estate (i.e	e. your executor/personal representative
Name	Address & Cour	ty of Residence	Relationship to You
If applicable, Please list an	d rank the person(s) you wo	uld like to have custod	y of your minor children
Name	Address & Cour	ty of Residence	Relationship to You

## **ESTATE INFORMATION**

Real Estate (this includes you	ur residence, if owned, and any	other parcels you own either	individually or jointly):		
Description of the parcel	Present Value	Purchase Price	Price Mortgage Balance		
If any of the parcels listed ab	ove are owned jointly with anot	ther individual, please explain	and list other owners:		
Partnership Interests:					
Name	Percentage You Hold	Value	Value of Partnership		
Closely Held Corporation Inte	erests:				
Name 	S/C Corp. Numb	per of Shares Perce	entage of Stock Value Per Shar		
Stocks and Bonds: Name	Approximate Total V	alue Held	d Individually or Jointly		
If any of the stocks/bonds list	ed above are owned jointly, ple	ease give the name(s) of other	r owners:		
Bank Accounts: Bank/Lending Institution	Type of Acco	punt	Held Individually or Jointly		
If any of the stocks/bonds list	ed above are owned jointly, ple	ease give the name(s) of other	r owners:		

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f you are expecting a	an inheritance, please	e explain and give an approxim	nation of the amount you	ı will inherit:	
Retirement Benefits:		5	_		
Keogh Plan:		Present Value	Ве	neficiary	
Life Insurance:					
Insurance Co.	Term or Whole	Face Value of Policy	Policy Owner	Beneficiary	
Annuities:					
Company Name	Current Value	Basis	Annuitant	Beneficiary	
Personal Property:	Approximate Value		Description		
Household Goods:					
urniture:					
Antiques:					
Other:					

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