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Estate Planning Questionnaire

For individuals and couples: please complete before our first meeting

This questionnaire gathers the information we need to design an estate plan that fits your family and your goals. Complete what you can, and leave blank anything you are unsure of: we will go over every section together.

If you are single, just complete the **"You"** columns.

Today's date _____

How did you hear about us?

_____

1. **Fill in what you can** — Leave blank anything you are unsure of.
2. **Return it to us** — Bring it to our meeting or deliver it to our office.
3. **Meet and review** — We discuss your goals and options together.
4. **Sign your plan** — We prepare your documents for signing.

Your privacy. Everything you share is kept confidential. For your protection, please **do not write Social Security numbers or full account numbers** on this form; the institution and the **last 4 digits** of each account are enough.

1 About You

	You	Spouse / Partner
Full legal name		
Other names used		
Date of birth		
Cell phone		
Email		
Occupation		
U.S. citizen?	☐ Yes ☐ No	☐ Yes ☐ No
Living parents? Inheritance expected?		

Home address

_____

Marital status: ☐ Single ☐ Married ☐ Registered domestic partners ☐ Divorced ☐ Widowed

Date and place of marriage

_____

Prior marriages (yours or your spouse's)?

_____

Do you have a prenuptial or other marital property agreement? ☐ Yes ☐ No

Do either of you own separate property (owned before marriage, inherited or received as a gift)? ☐ Yes ☐ No

Do you have an existing will or trust? ☐ Yes ☐ No **Date signed** _____

If yes, please bring a copy to our meeting.

2 Your Family

List all living children, including any from a prior marriage or relationship and any adopted children.

Child's name	Date of birth	Child of	Address and phone
		☐ Both ☐ You ☐ Spouse	
		☐ Both ☐ You ☐ Spouse	
		☐ Both ☐ You ☐ Spouse	
		☐ Both ☐ You ☐ Spouse	
		☐ Both ☐ You ☐ Spouse	

Any deceased children? If so, did they leave children of their own?

Number of grandchildren _____ **Any minor children or grandchildren?** ☐ Yes ☐ No

Does any child or beneficiary have special needs, receive government benefits, or face creditor, divorce or addiction concerns?

☐ Yes ☐ No

If you have no children, which relatives (siblings, nieces, nephews) should we know about?

3 What You Own

Approximate values are fine. Under "Owner," mark You, Spouse (Sp.) or Joint.

Type of asset	Institution and last 4 digits of account #	Owner	Approx. value	Beneficiary named?
Checking / savings		☐ You ☐ Sp. ☐ Joint		
Checking / savings		☐ You ☐ Sp. ☐ Joint		
CDs / money market		☐ You ☐ Sp. ☐ Joint		
Brokerage / investments		☐ You ☐ Sp. ☐ Joint		
Brokerage / investments		☐ You ☐ Sp. ☐ Joint		
Retirement (IRA, 401(k), pension)		☐ You ☐ Sp. ☐ Joint		☐ Yes ☐ No
Retirement (IRA, 401(k), pension)		☐ You ☐ Sp. ☐ Joint		☐ Yes ☐ No
Retirement (IRA, 401(k), pension)		☐ You ☐ Sp. ☐ Joint		☐ Yes ☐ No
Life insurance / annuity		☐ You ☐ Sp. ☐ Joint		☐ Yes ☐ No
Life insurance / annuity		☐ You ☐ Sp. ☐ Joint		☐ Yes ☐ No
Vehicles, jewelry, art, collections		☐ You ☐ Sp. ☐ Joint		

Real estate

Property address	How title is held	Approx. value	Loan balance

Title examples: joint tenants, community property, trust, or one spouse alone. The deed will show this.

Business interests

Business name and type (corporation, LLC, partnership)	Your ownership %	Approx. value

Estimated total estate _____ **Property in another state?** ☐ Yes ☐ No

Significant debts besides your mortgage (business loans, guarantees)? ☐ Yes ☐ No

4 Who Receives Your Estate

Specific gifts (optional: a particular item or amount to a person or charity)

Specific gift (cash, item or property)	To whom (person or charity)	Relationship

Your main beneficiaries (who receives the rest of your estate)

Beneficiary (person or charity)	Relationship	Share (% or fraction)

How should your beneficiaries receive their inheritance?

☐ All at once (outright) ☐ At certain ages (for example, 25, 30 and 35)

☐ Held in a lifetime trust for added protection ☐ Not sure yet: let's discuss

For couples: at the first death, should everything stay with the surviving spouse? ☐ Yes ☐ No ☐ Not sure

Backup beneficiaries if your main beneficiaries do not survive you

Anyone you intend to leave out (please explain), and any other wishes, such as for pets

5 The People You Trust

Name the people you would want to act for you. The same person often serves in more than one role; your successor trustee and executor are usually the same.

Your choices	1st choice	2nd choice	3rd choice
Successor trustee manages your trust			
Executor of your pour-over will			
Financial agent durable power of attorney			
Health care agent advance health care directive			

Spouse's choices	1st choice	2nd choice	3rd choice
Successor trustee manages your trust			
Executor of your pour-over will			
Financial agent durable power of attorney			
Health care agent advance health care directive			

Contact information for the people named above

Name	Relationship	Address	Phone

6 Health Care Wishes

We will discuss these choices with you in detail before your advance health care directive is prepared.

	You	Spouse / Partner
Organ donation	☐ Any purpose ☐ Transplant only ☐ No	☐ Any purpose ☐ Transplant only ☐ No
Final arrangements	☐ Burial ☐ Cremation ☐ Undecided	☐ Burial ☐ Cremation ☐ Undecided
Life support if there is no reasonable hope of recovery	☐ Withhold ☐ Continue ☐ Discuss	☐ Withhold ☐ Continue ☐ Discuss
Religious or other wishes		

7 Guardians for Minor Children

Complete only if you have children under 18.

Guardian for minor children	1st choice	2nd choice
Guardian of the person raises your children		
Guardian of the estate if different; manages their money		

8 Your Advisors

We may coordinate with them, with your permission.

Advisor	Name	Firm	Phone
Accountant / CPA			
Financial advisor			
Insurance agent			

9 Please Bring to Our Meeting

- ☐ Your current will or trust, if any
- ☐ Deeds for any real estate
- ☐ Recent account statements
- ☐ Life insurance and annuity information
- ☐ Retirement account beneficiary forms
- ☐ Business documents (articles, operating agreement, buy-sell agreement)
- ☐ Any prenuptial or marital property agreement

Thank you

Questions while completing this form? Call **(949) 429-2578** or email **jhartmann@attorneyjrh.com**. Our office is open Monday–Friday, 9:00 a.m. to 5:00 p.m.