

ESTATE PLANNING AND WILL INFORMATION FORM

WHEN YOU HAVE COMPLETED THIS FORM, please return it to my office or bring it to your scheduled office meeting. I rely upon the information you provide to be accurate and complete in all respects. If the information is not accurate and complete, the recommendations made may not be appropriate for your situation.

1. **Testator** (Person(s) making the will)

Name _____ Date of Birth: _____

Social Security No. _____ U.S. Citizen? Yes ___ No ___

Spouse's Name _____ Date of Birth: _____

Spouse's Soc. Sec. No. _____ U.S. Citizen? Yes ___ No ___

Street Address _____ Apt. _____ County _____

City _____ State _____ Zip _____

State of Residence _____

Telephone No. Home: _____ W/Client _____ W/Spouse _____

E-mail _____ Prefer E-mail? Yes ___ No ___

2. **Marriage**

a. Have you and your spouse signed a Premarital Agreement? Yes ___ No ___
If you have, please bring a copy of it to the meeting.

b. Have you or your spouse been divorced? Yes ___ No ___
If so, please bring a copy of the divorce decree to the meeting.

3. **Children.** Please list ALL your children, including deceased children, children born out of wedlock and children you wish to omit from your estate plan.

<u>Name of Child</u>	<u>Date of Birth</u>	<u>Address/Phone</u>	<u>Child of:</u>
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Identify any child who is not a natural or adopted child of both you and your spouse.

- a. Have any children received an advance on their inheritance or are any children financially indebted to you? If so, please explain.
- b. Is there any reason NOT to treat your children equally? If so, please explain.
- c. Are any of the children under a disability?
- d. Do you have any special concerns or objectives regarding your children?
- e. **Guardians.** Who should be guardian of your minor children? (A guardian has physical and legal control over your children until they reach the age of 18.)

Name: _____

Address: _____

Alternate Guardian: _____

Address: _____

- 4. **Personal Representative.** Who should be personal representative (executor) of your estate? A personal representative is responsible for probating your will, paying your debts, collecting your assets and settling your estate.

Name: _____ Relationship: _____

Address: _____

Alternate Pers. Rep: _____ Relationship: _____

Address: _____

- 5. **Trusts.** If a trust is appropriate to include in your estate plan, who should be the trustee? A trustee is the person or entity who is responsible for managing the assets placed into the trust. A trustee manages the assets for your children or other beneficiaries until they reach specified ages. If you do not establish a trust, children inherit at age 18 in Minnesota. You may name an individual, bank or trust company, or both, to act as your trustee.

Name: _____

Address: _____

Alternate Trustee: _____

Address: _____

6. **Financial Inventory.** Use approximate values under each person showing ownership of each asset. BRING SUPPORTING DATA FOR EACH MAJOR ASSET, i.e. retirement plan statements, stock and bond account statements, etc. NOTE: Bring copies of deeds to real estate you own.

ASSETS	HUSBAND	WIFE	JOINT
Home			
Other Real Estate			
Other Real Estate			
Checking Accounts			
Savings Accounts			
MoneyMarket Acts.			
Vehicles			
Personal Property			
Stocks & Bonds			
Business Interests			
LifeInsurance(Face)			
On Husband's Life			
On Wife's Life			
Retirement Accts:			
IRA			
Pension			
Prof.Sharing/401k			
Other Retirement			
Annuities			
Other Assets:			
TOTAL			

LIABILITIES	HUSBAND	WIFE	JOINT
Home Mortgage			
Other Mortgages			
Debts to Family			
Other Debts:			
TOTAL			

7. Beneficiary Designations

a. Life Insurance:

Policy Name	Face Value	Owner	Insured	Beneficiary

b. Retirement Plans:

Name & Type	Owner	Balance	Beneficiary

c. Does your retirement plan have a death benefit? Yes ____ No _____. If so, who is the named beneficiary?

8. **Personal Property.** Describe and give a value of any items of substantial value, such as vehicles, works of art, jewelry, etc. Be sure to include any items listed on an insurance rider.

Description**Approximate Value**

Personal Property

Vehicles

Collectibles

Jewelry

Boats/Airplanes

Other:

9. **Safe Deposit Box**

Do you have a safe deposit box? Yes ___ No ___ If so, where? _____

Who else (if anyone) has access to your box? _____

10. **Future Inheritances.** Do you expect any inheritances in the near future? If so, please give details.

11. **Financial Advisors:**

Accountant:

Address:

Telephone:

Financial Advisor:

Address:

Telephone:

12. **Primary Physician.** Who is your primary physician?:

Name: _____

Address: _____

13. Special Requests: Special requests regarding funeral, cremation or burial instructions are best handled by a Letter of Instruction or other statement (separate from your will) to your family or other responsible person. Organ donation is best handled in a Health Care Directive.

14. Discussion Issues: We will discuss the following issues at the meeting:

○ **Current Will.** Do you have a will or revocable trust? If so, **bring a copy** to the meeting.

○ **Predeceased Child.** If any child should predecease parent, should his/her share pass through to his/her children? If so, please indicate grandchildren, if any.

Do you wish to include grandchildren born out of wedlock? Yes ____ No ____

○ **Trusts.** Do you wish to have a trust established for the benefit of your spouse and/or children?

○ **Specific Gifts.** Do you wish to make any specific gifts to charities or individuals?

○ **No Family Survives.** How should your estate be distributed if your spouse and/or children do not survive you? (For example: family, charity, etc.)

○ **If No Children.** If you do not have children, to whom should your estate pass (beyond a surviving spouse, if any)?

○ **Health Care Directive.** Are you interested in preparing a Health Care Directive appointing someone to make health care decisions for you and/or stating your preferences for health care? This document can also include instructions regarding organ donations.

○ **Power of Attorney.** Are you interested in preparing a Power of Attorney granting another person (spouse or others) the power to act on your behalf to manage your assets and pay your bills if you become incompetent or unable to sign your name?

○ **Loan Guarantees.** Have you guaranteed any loans for your children, grandchildren or any other person? If so, bring details to the meeting.