

ESTATE PLANNING QUESTIONNAIRE
MARRIED COUPLES, DOMESTIC PARTNERS OR UNMARRIED COUPLES

BACKGROUND INFORMATION:

Marital Status (check one): Married <input type="checkbox"/> Legal Domestic Partners <input type="checkbox"/> Unmarried <input type="checkbox"/>	
State of Marriage of Domestic Partnership: _____	
Check if there are either of the following agreements in existence (if so, provide a copy): Pre-nuptial/Post-nuptial Agreement: <input type="checkbox"/> Palimony Agreement: <input type="checkbox"/>	
If married, have you lived in any of the following community property states during your marriage (if yes, please indicate which state or states): _____ (Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas, Washington and Wisconsin. Puerto Rico)	
Spouse/Partner #1	Spouse/Partner #2:
Name:	Name:
Date of Birth:	Date of Birth:
SS#:	SS#:
Country of Citizenship:	Country of Citizenship:
Home Address:	
Home Phone:	
Work Address:	Work Address:
Work Phone:	Work Phone:
Mobile Phone:	Mobile Phone:
Fax:	Fax:
E-mail Address:	E-mail Address:

FAMILY INFORMATION: (Please provide family information below and indicate which, if any, children/grandchildren are not the children of both Spouses/Partners):

Children's Names:	Child's Date of Birth:	Spouse Name:
Grandchildren's Names:	Grandchild's Date of Birth:	Spouse Name:
Parents' of Spouse/Partner#1:	If deceased, indicate dates of death:	
Parents' of Spouse/Partner#1:	If deceased, indicate dates of death:	

FINANCIAL INFORMATION: (Please provide estimates of asset information and specify which Spouse/Partner owns the asset by inserting the information in the applicable column below):

Asset:	Value:	Spouse/Partner #1 Name:	Spouse/Partner #2 Name:	Joint:
Home				
Value				
Mortgage Balance				
Other Real Estate				
Address:				
Value				
Mortgage Balance				

Asset:	Value:	Spouse/Partner #1 Name:	Spouse/Partner #2 Name:	Joint:
Marketable Securities and Cash				
Business Interests				
Tangible personal property (e.g. automobiles, jewelry, artwork and antiques)				
Miscellaneous:				
Life Insurance (provide death value, approximate cash value, company and policy information)				
Company Policy #				
Company Policy #				
Company Policy #				
IRA, Other retirement, pension, profit plan or other employee plan				
Company Account #:				
Company Account #:				
Company Account #:				
Company Account #:				

OTHER QUESTIONS:

1. What is the approximate annual income for each Spouse/Partner:
2. Do either of you receive income or any other interest in any trusts? (If so, please estimate the amount and provide a copy of the trust document, if available)
3. Has either of you previously filed gift tax returns? (If so please provide copies)
4. Have either of you been previously married? If so, are there any financial obligations to your former spouse(s) or children from that relationship? Please provide a copy of the property settlement agreement.