ESTATE PLANNING QUESTIONNAIRE

Please answer as completely as possible. Use additional paper if necessary. Your answers will be used as a basis for our will and estate planning interview.

Date form completed:	Date	form	comp	oleted:
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Personal Information

Your Full Legal Name:			
Date of Birth:	Citizenship:	Social Security N	umber:
Current address:			
Phone #'s: Residence:	Cell:	Business:	Other:
E-mail(s):			
Your Occupation / Employ	yment:		
Status of Health / Insurable	e?		
If Married:			
Date and Place of Current I	Marriage:		
Spouse Full Legal Name:			
Date of Birth:	Citizenship:	Social Security N	umber:
Current address:			
Phone #'s: Residence:	Cell:	Business:	Other:
E-mail(s):			
Spouse Occupation / Empl	oyment:		
If any prior marriage, list sp	ouse name and date o	of marriage and other r	elevant details:
Information About Your health of child, education goals of	1		1 5 1
Full Legal Name Address Phone	Date of Birth	Special Considerations	Child's Marital Status and Children, if any

Others: List any other dependents or others who we should be aware of for estate planning purposes:

If setting up a Trust, who do you want the Trustee to be?

The Successor Trustee?

Who do you want the POA to be?

Utah Advance Health Care Directive, who do you want to state as an authority, if any?

Financial Information

Current Income

Name (Husband, wife, other)	Source (employer, SSI, pension, retirement benefits, rental income, etc.)	Monthly Amount

Assets

List the current value of each, disregarding any debt or liabilities attached to asset.

Real Property

Type of Property	Ownership (i.e. joint	Current Value	Other Information
Location	tenancy, or individual)		
Personal Residence			

Life Insurance

Insurance	Type (whole life,	Policy Owner	Death Benefit	Named
Company	term, other)			Beneficiary

Retirement Plans

Company / Custodian	Type (Pension, IRA, Roth, 401k)	Owner	Value	Named Beneficiary
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Accounts

Bank / Financial	Type (checking, saving, CD, other)	Owner (husband,	Approximate current
Institution	CD, other)	wife, joint, other)	balance
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Name	Type (stock, bond, mutual fund)	Owner (husband, wife, joint, other)	Current value

Closely held business	interests:	approximate value	\$
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Other Assets: Describe any other assets such as intangible personal property, deferred compensation plan, club memberships, time shares, etc.:

Tangible Personal Property: List approximate value of *total* of home furnishings, autos and other vehicles, jewelry, silver, china, fur, art, sporting goods, hobby collections, etc. \$

If you have any special personal property items that you wish to bequeath to a specific person or person, please create a *separate* list of these items and the person you wish to receive the item.

Liabilities

Include mortgages, home equity loans, credit card, auto loans, other vehicle loans, personal loans, student loans, medical debts, promissory notes, judgments, liens, alimony, child support, etc.

Туре	Husband/wife/joint	Monthly payment	Approximate loan balance
Personal residence mortgage			

Objectives and Goals

Please briefly discuss what you would like to accomplish as part of this process. You may want to include your thoughts about the following issues:

- Providing for children / grandchildren
- Estate and gift tax planning

- Simplification of estate administration
- Charitable objectives

Who may we thank for referring you to our law office?

Thank you for your attention to this questionnaire.

If available please furnish a **copy** of your existing Wills, Codicils and any Trust Agreements of any trusts in which you may have an interest (as grantor, trustee, beneficiary, etc.).