# Estate and Tax Planning Data Form

Scheduled Date	of Conference	e						
Briefly, what we	ould you like	to accomp	olish at this	conference	?			
	I. F	FAMILY I	NFORMAT	ΓΙΟΝ: Pleas	se use full n	ames.		
Husband				Wife				
Date of Birth				Date o	f Birth			
S.S. No.				S.S. N	0.			
Work Phone				Work 1	Phone			
E-mail				E-mail				
Home Address								
Home Phone		F	ax		US Citize	en? (H)	(W)	
Name			Ch	ildren				
Date of Birth								
Address								
Telephone No.								
Marital Status								
Their children	Name	DOB	Name	DOB	Name	DOB	Name	DOB
First								
Second Third								
FAMILY CIRC special health pr								

If you have any minor children state whether any such child has separate assets (such as custodial
accounts), including approximate amounts and in whose name they are held:

#### II. INCOME AND EMPLOYMENT

	Husband	Wife
Occupation		
Salary	\$	\$
Rental Income After Expenses	\$	\$
Dividends/Interest	\$	\$
Pension	\$	\$
Social Security	\$	\$
Other Income	\$	\$
Total Annual Income	\$	\$

#### III. ASSETS

A. <u>REAL ESTATE</u>: Please (1) provide a copy of all deeds, if possible; (2) indicate whether you rent or own your residence; and (3) list additional properties on a separate sheet if extra space is required.

Location	Approximate Value	Mortgage Balance	Owners as Named On the Deed
1.	\$	\$	
2.	\$	\$	
3.	\$	\$	
4.	\$	\$	
5.	\$	\$	
TOTAL:	\$	\$	

## B. BANK ACCOUNTS, CD'S, MONEY MARKET ACCOUNTS:

Type of Account	Approximate	Name(s) on Accounts
Savings, Checking, CD, etc.	Balance	
1.	\$	
2.	\$	
3.	\$	
4.	\$	
5.	\$	
TOTAL		

# C. <u>STOCKS, BONDS & OTHER INVESTMENTS</u>: It is not necessary to list the individual stocks, bonds, etc.

Type of Assets (Stocks, Bonds, Mutual Funds, Treasury Bills, Single Premium Annuities, etc.)	Approximate Value	Name of Brokerage House or Fund	Name(s) on Securities or Brokerage Accounts
1.	\$		
2.	\$		
3.	\$		
4.	\$		
5.	\$		
6.	\$		
TOTAL	\$		

## D. <u>LIFE INSURANCE</u>: Please bring the most recent annual policy statement if you have it.

Person Insured		
Face Value	\$ \$	\$ \$
Cash Value (Loan)	\$ \$	\$ \$
Beneficiary		
Owner of the Policy		
Type of Policy (Term or Permanent) and Name of Company		

# Total Life Insurance (Face Value):

Husband		Wife		
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# E. PENSION, PROFIT SHARING, IRA, KEOGH OR OTHER RETIREMENT PLANS:

Type of Plan		
(IRA, Keogh, Pension, TIAA, etc.)	Current Value	Participant (H or W)/Beneficiary
1.	\$	
2.	\$	
3.	\$	
4.	\$	
TOTAL		

3.								
Э.	\$		-					
4.	\$							
TOTAL								
Total Lump Sum Retirement Plan Value								
Husband \$ Wife \$								
F. <u>BUSINESS INTERESTS:</u> Briefly explain any business interests owned by either (or both) of you. Please bring with you a copy of the business's last federal tax return, or Schedule C from your own return if your business is a sole proprietorship. Finally, please estimate a value for the business.								
	Estin	nated Value	e:					
G. <u>MISCELLANEOUS</u> : Indicate expected inheritances; valuable personal property; promissory notes payable to you; or any other special factors which may affect your situation.								
	tors which may affect y	our situation	on.					
payable to you; or any other special fac  H. PRIOR GIFTS: Itemize past gifts ov	tors which may affect y	our situation	on.					
payable to you; or any other special fac  H. PRIOR GIFTS: Itemize past gifts ov	tors which may affect y	our situation	on.					
payable to you; or any other special fac  H. PRIOR GIFTS: Itemize past gifts ov	tors which may affect y	our situation	on.					
payable to you; or any other special fac  H. PRIOR GIFTS: Itemize past gifts ov	tors which may affect y	our situation	on.					

#### LIABILITIES

Indicate significant debts and debts guaranteed by you [excluding mortgages listed earlier], as well as lawsuits, or claims, present or anticipated.

Total Liabi	lities			
Husband	\$	Wife	\$ Joint	\$

#### V. FINANCIAL RECAP

Please list the total values from Section III, Items A through G:

	Husband	Wife	Joint
Real Estate	\$	\$	\$
Bank Assets	\$	\$	\$
Mutual Funds & Savings Bonds	\$	\$	\$
Retirement (IRAs)	\$	\$	\$
Insurance	\$	\$	\$
Business	\$	\$	\$
Miscellaneous	\$	\$	\$
Total Assets	\$	\$	\$
Total Liabilities	\$(	)\$( )	\$( )
(Induding Mortgages)			
Net Worth	\$	\$	\$

#### VI. DISPOSITION OF ASSETS

or purposes of our evaluation or your estates, and our recommendations for the structure of your estates in, it is important for us to know your wishes in a general way with regard to the disposition of your operty; e.g., the desired shares for your children, or other relatives, friends, charity, etc.				

#### VII. FIDUCIARIES

Most estate plan documents involve the appointment of a "fiduciary." That is to say, a person who occupies a position of trust, and who must carry out certain duties. In Wills, spouses typically serve as the Executor for each other. Spouses and/or one or more children also often serve in a "durable power of attorney" (in which an attorney-in-fact and a guardian are appointed) and in a "health care proxy" (in which a health care agent is appointed). If your plan involves revocable trusts, in many instances, either or both of you can be the initial trustee(s) of your respective trusts and you appoint a successor trustee. Please think about whom you would choose to serve as a <u>successor fiduciary</u> in case the first person chosen is unable to serve. Please indicate below the person(s) or professional(s) you might so choose.

Name	Address and Telephone Number	Relationship

#### VIII. YOUR PROFESSIONAL ADVISORS

	Name	Firm	Telephone
Accountant			
Attorney			
Insurance Advisor			
Financial Planner			
Stockbroker			

IX. SAFE DEPOSIT - Location and persons having access:

X. ADDITIONAL COMMENTS OR QUESTIONS:			
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