Peebles Law Firm

ESTATE PLANNING WORKSHEET

This worksheet is a very important step in the estate planning process. By accurately completing this worksheet you will be providing me with much of the background information concerning your estate which will assist me in providing the highest level of service to you.
Once you have completed the worksheet you may either send it to me prior to our initial meeting or bring it with you. If you are unsure as to a question or a particular response simply mark the question and we will discuss it at our meeting.

CLIENT BACKGOUND INFORMATION

Name (w/middle initial) ______________________________ Age D.O.B.___________
Spouses Name (w/middle initial) ________________________ Age D.O.B.___________
Occupation:__________________________ Spouse's Occupation ______________________
Address ____
____
Telephone: ________________________(Home) _____________________________(Work)
Are you and your spouse United States citizens?______________________________________

Family:

Children: ____Age____D.O.B.________
____ Age____D.O.B.__________
____ Age____D.O.B.__________
____ Age____D.O.B.__________
____ Age____D.O.B.__________
Please indicate: (1) If children are by a previous marriage, stepchildren or adopted; and (2) the address of children not living with you.

Parents (if living):

___________________________________ _____________________________________
___________________________________ _____________________________________

Brothers/Sisters:

____ Age __________
____ Age __________
____ Age __________
____ Age __________

FIDUCIARIES

1. Personal Representative: Please list, in order of preference, who you would like to serve as Personal Representative of your estate. The Personal Representative is the person who handles your financial affairs and administers your estate after your death.
NAME RELATIONSHIP ADDRESS DATE OF BIRTH
_____________ _______________ ______________________________ ________________
_____________ _______________ ______________________________ ________________
_____________ _______________ ______________________________ ________________

2. Guardian: If you have any children under the age of 18, please list, in order of preference, who you would like to serve as Guardian of any minor children. The guardian is the person who will raise and care for your children until they reach the age of 18.
NAME RELATIONSHIP ADDRESS DATE OF BIRTH

_____________ _______________ ______________________________ ________________
_____________ _______________ ______________________________ ________________
_____________ _______________ ______________________________ ________________

Age for Family Trust to Terminate: __________ (22 or 25 are common ages depending upon the size of your estate and whether you anticipate graduate school.)

3. Trustee: Please list, in order of preference, who you would like to serve as Trustee of any trusts.
Normally married couples nominate the other spouse as their first chose. Whomever your choose,
the person selected should be reasonably skilled at managing financial matters.
NAME RELATIONSHIP ADDRESS DATE OF BIRTH

_____________ _______________ ______________________________ ________________
_____________ _______________ ______________________________ ________________
_____________ _______________ ______________________________ ________________

SPECIAL FAMILY CONSIDERATIONS

Prior marriages: ____
Children of prior marriages: ____
Handicapped child or other beneficiary (mental or physical):___________________________
Beneficiaries with special needs or problems: _________________________________
Any other family concerns or issues you may have: ______________________________

FAMILY ADVISERS

NAME ADDRESS PHONE NUMBER
Accountant ______________ _________________________________ ______________
Insurance agent ______________ _________________________________ ______________
Stock broker ______________ _________________________________ ______________
Physician ______________ _________________________________ ______________
Other ______________ _________________________________ ______________

PROPERTY DISPOSITION

1. Special Bequests: This is where you specify specific gifts to specific people(Please use attached list if necessary)

2. General Bequests-(Residuary Estate) Who shall receive the remainder of your estate?
ASSETS
Item $Value/Amount How held?(Husband,
Wife or Jointly)
Cash $____________ _______________

Checking accounts $____________ _______________
Savings accounts $____________ _______________
Other bank accounts $____________ _______________
Securities
Stock(company/shares) $____________ _______________
US Bonds $____________ _______________
Mutual funds $____________ _______________
Other $____________ _______________
Personal Property
Household goods $____________ _______________
Jewelry $____________ _______________
Apparel $____________ _______________
Other $____________ _______________
Real Estate
Home $____________ _______________
Recreational $____________ _______________
Investment $ ____________ _______________
Other $____________ _______________
Business Holdings
Briefly describe business:
Corporation, LLC, Partnership? _____________
Best estimate of fair market value $_____________ ________________
Retirement
IRA, Profit Share, 401K. etc $_____________ ________________
Specify primary and alternate beneficiary designation____________________
____
IRA, Profit Share, 401K. etc $______________ ________________
Specify primary and alternate beneficiary designation ____________________
____
Insurance and Annuities
Type (term, etc) ______________ $______________ ________________
Specify primary and alternate beneficiary designation ____________________
____
Type (term, etc) ______________ $_____________ ________________
Specify primary and alternate beneficiary designation ____________________
____
Inheritance
Do you or your spouse expect to receive any inheritance within the next 10 years?
_______________. Best estimate of amount $_________________.
Other assets not listed above
Type
___________ $____________ _______________
___________ $____________ _______________
___________ $ ____________ _______________

LIABILITIES
Mortgages $ ____________ ________________
Car loans $ ____________ ________________
Personal loans $ ____________ ________________
Business loans $ ____________ ________________
Life Insurance loans $ ____________ ________________
Other $ ____________ ________________
_____________________________ $ ____________ ________________
_____________________________ $ ____________ ________________
_____________________________ $ ____________ ________________

MISCELLANEOUS
Estate planning concerns: Briefly list specific concerns you may have. (examples are concerns about probate, taxes, a particular child, squabbling, attorney fees, etc)
Questions: You may use this space to list any questions that you want me to address.
1.
2.
3.
4.

Cremation/Funeral Arrangements/Cemetery? ________________________________