



**FAMILY INFORMATION**

Do you have any children from your current marriage?  Yes  No

Children:	Birth Date:	SS#:
_____	____/____/____	____-____-____
_____	____/____/____	____-____-____
_____	____/____/____	____-____-____
_____	____/____/____	____-____-____
_____	____/____/____	____-____-____

Do you have legal custody of these children?  Yes  No  
If No who has custody? \_\_\_\_\_  
What is your financial obligation? \_\_\_\_\_  
Are any of your children adopted? If so, please list names and dates of adoption  
\_\_\_\_\_

Does either spouse have any Prior Marriages?  Yes  No

Ex-Spouse:	Address:
_____	_____
_____	_____

Does either spouse have any children from prior marriages?  Yes  No

Children:	Birth Date:	SS#:
_____	____/____/____	____-____-____
_____	____/____/____	____-____-____
_____	____/____/____	____-____-____
_____	____/____/____	____-____-____
_____	____/____/____	____-____-____

Do you have legal custody of these children?  Yes  No  
If No who has custody? \_\_\_\_\_  
What is your financial obligation? \_\_\_\_\_

**ESTATE PLANNING DOCUMENTS**

	<u>Individual #1</u>	<u>Individual #2</u>	<u>Joint</u>
1. Will	<input type="checkbox"/>	<input type="checkbox"/>	
2. Power of Attorney	<input type="checkbox"/>	<input type="checkbox"/>	
3. Health Care POA	<input type="checkbox"/>	<input type="checkbox"/>	
4. Advanced Directive	<input type="checkbox"/>	<input type="checkbox"/>	
5. Trust (names below)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

a. \_\_\_\_\_

b. \_\_\_\_\_

c. \_\_\_\_\_

Estate Planning Original Documents are located here (bank, safe, personal rep, contact, etc):

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**FINANCIAL ASSETS**

(please attach a separate listing if more room is needed)

<u>1. Checking Accounts</u>	<u>Estimated Value</u>	<u>Individual #1</u>	<u>Individual #2</u>	<u>Joint</u>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL:</b>	\$ _____			

<u>2. Savings Accounts</u>	<u>Estimated Value</u>	<u>Individual #1</u>	<u>Individual #2</u>	<u>Joint</u>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL:</b>	\$ _____			

<u>3. CDs</u>	<u>Estimated Value</u>	<u>Individual #1</u>	<u>Individual #2</u>	<u>Joint</u>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL:</b>	\$ _____			

Beneficiaries: \_\_\_\_\_

<u>4. Life Insurance</u>	<u>Estimated Value</u>	<u>Individual #1</u>	<u>Individual #2</u>	<u>Joint</u>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL:</b>	\$ _____			

Beneficiaries: \_\_\_\_\_

<u>5. Portfolios</u>	<u>Estimated Value</u>	<u>Individual #1</u>	<u>Individual #2</u>	<u>Joint</u>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TOTAL:	\$ _____			

Beneficiaries: \_\_\_\_\_

<u>6. Investments</u>	<u>Estimated Value</u>	<u>Individual #1</u>	<u>Individual #2</u>	<u>Joint</u>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TOTAL:	\$ _____			

Beneficiaries: \_\_\_\_\_

<u>7. Stock/Shares</u>	<u>Estimated Value</u>	<u>Individual #1</u>	<u>Individual #2</u>	<u>Joint</u>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TOTAL:	\$ _____			

Beneficiaries: \_\_\_\_\_

<u>8. IRAs</u>	<u>Estimated Value</u>	<u>Individual #1</u>	<u>Individual #2</u>	<u>Joint</u>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TOTAL:	\$ _____			

Beneficiaries: \_\_\_\_\_

9. <u>Other Retirement</u>	<u>Estimated Value</u>	<u>Individual #1</u>	<u>Individual #2</u>	<u>Joint</u>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TOTAL:	\$ _____			

Beneficiaries \_\_\_\_\_

10. <u>Business Interests</u>	<u>Estimated Value</u>	<u>Individual #1</u>	<u>Individual #2</u>	<u>Joint</u>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TOTAL:	\$ _____			

Beneficiaries \_\_\_\_\_

11. <u>Other Finances</u>	<u>Estimated Value</u>	<u>Individual #1</u>	<u>Individual #2</u>	<u>Joint</u>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TOTAL:	\$ _____			

Beneficiaries: \_\_\_\_\_

**LIABILITIES/DEBTS**

(please attach a separate listing if more room is needed)

<u>1. Mortgages</u>	<u>Estimated Value</u>	<u>Individual #1</u>	<u>Individual #2</u>	<u>Joint</u>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TOTAL:	\$ _____			

<u>2. Loans</u>	<u>Estimated Value</u>	<u>Individual #1</u>	<u>Individual #2</u>	<u>Joint</u>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TOTAL:	\$ _____			

<u>3. Credit Cards</u>	<u>Estimated Value</u>	<u>Individual #1</u>	<u>Individual #2</u>	<u>Joint</u>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TOTAL:	\$ _____			

<u>4. Automobiles</u>	<u>Estimated Value</u>	<u>Individual #1</u>	<u>Individual #2</u>	<u>Joint</u>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TOTAL:	\$ _____			

5. <u>Other Debts</u>	<u>Estimated Value</u>	<u>Individual #1</u>	<u>Individual #2</u>	<u>Joint</u>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL:</b>	\$ _____			

**\*\*Automatic Withdrawal Plans:**

(only for general knowledge of personal representative, not part of estate planning):

Account:

Description:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**\*\*Online Account Info:**

(only for general knowledge of personal representative, not part of estate planning):

Account:

Description:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____



**PROPERTY**

(please attach a separate listing if more room is needed)

Real Estate:

1. Principal Residence

Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Estimated Value \$ \_\_\_\_\_ Tax Assessment \$ \_\_\_\_\_  
Name(s) on Deed \_\_\_\_\_  
Amount of Indebtedness, if any \$ \_\_\_\_\_

2. Commercial Properties

Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Estimated Value \$ \_\_\_\_\_ Tax Assessment \$ \_\_\_\_\_  
Name(s) on Deed \_\_\_\_\_  
Amount of Indebtedness, if any \$ \_\_\_\_\_

Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Estimated Value \$ \_\_\_\_\_ Tax Assessment \$ \_\_\_\_\_  
Name(s) on Deed \_\_\_\_\_  
Amount of Indebtedness, if any \$ \_\_\_\_\_

3. Others (vacation, rental, farm, etc)

Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Estimated Value \$ \_\_\_\_\_ Tax Assessment \$ \_\_\_\_\_  
Name(s) on Deed \_\_\_\_\_  
Amount of Indebtedness, if any \$ \_\_\_\_\_

Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Estimated Value \$ \_\_\_\_\_ Tax Assessment \$ \_\_\_\_\_  
Name(s) on Deed \_\_\_\_\_  
Amount of Indebtedness, if any \$ \_\_\_\_\_

Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Estimated Value \$ \_\_\_\_\_ Tax Assessment \$ \_\_\_\_\_  
Name(s) on Deed \_\_\_\_\_  
Amount of Indebtedness, if any \$ \_\_\_\_\_

Personal Property (of significant value):

(describe & estimate value)

1. Furnishings

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

2. Jewelry

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

3. Collectibles

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

4. Art

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

5. Other

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

TOTAL: \$ \_\_\_\_\_

## **SUMMARY OF FINANCIAL INFORMATION**

### **ASSETS:**

	<u>Individual #1</u>	<u>Individual #2</u>	<u>Joint</u>
1. Checking Accounts	\$	\$	\$
2. Savings Accounts	\$	\$	\$
3. CDs	\$	\$	\$
4. Life Insurance	\$	\$	\$
5. Portfolios	\$	\$	\$
6. Investments	\$	\$	\$
7. Stock/Shares	\$	\$	\$
8. IRAs	\$	\$	\$
9. Other Retirement	\$	\$	\$
10. Business Interests	\$	\$	\$
11. Other	\$	\$	\$
<b>Gross Total:</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>

### **LIABILITIES/DEBTS:**

	<u>Individual #1</u>	<u>Individual #2</u>	<u>Joint</u>
1. Mortgages	\$	\$	\$
2. Loans	\$	\$	\$
3. Credit Cards	\$	\$	\$
4. Automobiles	\$	\$	\$
5. Other	\$	\$	\$
<b>Gross Total:</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>

### **PROPERTY:**

	<u>Individual #1</u>	<u>Individual #2</u>	<u>Joint</u>
1. Residence	\$	\$	\$
2. Commercial	\$	\$	\$
3. Other	\$	\$	\$
4. Personal	\$	\$	\$
<b>Gross Total:</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>
<b>Net Total:</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>