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ESTATE PLAN INFORMATION SHEET

1. Client's Full Name: \_\_\_\_\_  
Last First Middle and/or Maiden
2. Present Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
3. Home Telephone: \_\_\_\_\_
4. Cell Phone: \_\_\_\_\_
5. Social Security No: \_\_\_\_\_
6. Driver's License No: \_\_\_\_\_
7. Date became FL resident: \_\_\_\_\_ US Citizen: \_\_\_\_\_
8. Religious Affiliation: \_\_\_\_\_
9. Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_
10. Married: \_\_\_\_\_ Single \_\_\_\_\_ Widowed: \_\_\_\_\_ Divorced: \_\_\_\_\_
11. If married, date / place of marriage: \_\_\_\_\_
12. Full Name of Spouse: \_\_\_\_\_  
Last First Middle and/or Maiden
13. Spouse's Social Security No: \_\_\_\_\_
14. Spouse's Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_
15. Name and address of Client's Present Employment or, if retired, last place employed:  
\_\_\_\_\_  
\_\_\_\_\_

16. Business Telephone: \_\_\_\_\_

17. Names of children, oldest first:

<u>Name</u>	<u>Address</u>	<u>Phone No.</u>	<u>DOB</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

18. If any of the above children were born of a previous marriage, please indicate child's name and other parent's name and address:

<u>Child's Name</u>	<u>Parent's Name</u>
_____	_____
(Address) _____	_____
_____	_____
(Address) _____	_____

19. Names of any grandchildren and names of their parent's:

<u>Name</u>	<u>Address &amp; Phone No.</u>	<u>Parent's Name</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

20. Do you presently have a current Last Will and Testament or Trust?

Will: Yes \_\_\_ No\_\_\_ Trust: Yes \_\_\_ No\_\_\_; if yes, please attach a copy or provide information as to location of Last Will and Testament or Trust:

\_\_\_\_\_  
\_\_\_\_\_

21. Present assets:

<u>Real Estate Address</u>	<u>Value</u>	<u>Name(s) of Record Title Holder(s)</u>
_____		
_____		
_____		
_____		

Name of Mortgagee, amount of mortgage and monthly payment, if any, on #21

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

22. Personal Property (please list type and value of all personal property such as automobiles, furniture, boats, jewelry, valued paintings and collections):

<u>Description</u>	<u>Value</u>
Auto 1	_____
Auto 2	_____
_____	
_____	
_____	

23. Cash, Money Markets, Certificates of Deposit, and Savings:

<u>Approximate Amount</u>	<u>Name of Bank or Credit Union/Address</u>	<u>Type of Account</u>
_____		
_____		
_____		
_____		

24. Safety Deposit Boxes:

<u>Depository</u>	<u>Address</u>	<u>Contents</u>
_____		
_____		

25. Intangible Property (please list all stocks, bonds, mutual funds, promissory notes and real estate mortgages owned):

Description	Value	Titled Name of Owner

Name of Broker: \_\_\_\_\_

26. Life Insurance and Annuities:

Name of Company	Beneficiary	Face Value

Please list location of above policies and annuities.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

IRA's, 401ks	Where located	Beneficiary(ies)	Amount

28. Retirement programs (if retired, please explain briefly the type and nature of any retirement program under which you may now, or in the future, be entitled to benefits):

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29. Business interest (if you are the owner, partner or major stockholder in any business, please list the name of the business and the extent of your ownership):

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30. Debts and mortgages (please list any and all debts for which you are now obligated or for which your estate may be obligated):

Description	Amount	Creditors	Date Due (if any)

31. Beneficiary Information:  
If you can desire any specific items of real or personal property or case bequeathed to any particular person or group of persons, please indicate the following:

Description of gift	Name/Address of Beneficiary(ies)

32. Remainder of Estate (please indicate the person or group of persons to whom you wish the remainder of your estate assets to be distributed):

Name of Person	Share of Remainder

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33. Churches or charities (if you wish any religious, charitable or other organization to receive any portion of your estate, please indicate):

<u>Institution and address</u>	<u>Amount of Item</u>
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34. Estate administration (please list names(s), address(es), phone numbers and relationship, if any, of the person or persons you wish to serve as the Personal Representative and the Alternate Personal Representative or your estate):

Name	Address	Phone Number	Relationship
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Guardian (if you have minor children, please list the name, address and relationship of the person or persons and alternate you wish to serve as the guardian of the person of your minor children):

Name	Address	Phone Number	Relationship
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Trustee (if you have a Trust, please list the name(s), address(es) and relationship(s) of the person or persons and alternate you wish to serve as the Trustee of your Trust):

Name	Address	Phone Number	Relationship
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