

ESTATE PLANNING WORKSHEET

(Married or Single – Single persons, please ignore references to Spouse)

This worksheet will provide and organize some important information to help your estate-planning attorney recommend a plan that suits your individual situation and wishes for the future. It will help her decide and also explain how you can plan ahead to save taxes and/or administrative expenses. You may write on the back of the form or attach other pages if needed.

Husband's full legal name _____ Date of Birth _____
Home phone _____ Work phone _____ SS# _____
Wife's full legal name _____ Date of Birth _____
Home phone _____ Work phone _____ SS# _____
Address (including zip code) _____

Both spouses U.S. Citizen? : Yes No Have you ever filed a gift tax return ? Yes No
Describe your health: Husband _____ Wife _____

What is your primary motivation for considering estate planning: (*select one or more*)

- Making sure your property goes to who you want to have it Avoiding Probate Court
 Federal Estate Tax Planning (for estates to be over \$1,000,000) Business or Farm Planning
 Guardianship for Minor Children Concerns about Potential Nursing Home Expenses
 Other: _____

How soon would you like to complete planning? Is there a specific deadline, such as an upcoming trip, surgery, etc. ? _____

Do you hold everything jointly with your spouse, or is some property separate?
Yes - all joint except IRA, pensions, etc No - some separate

CHILDREN (indicate if by Husband, Wife or Joint = H/W/J)	Sex	H/W/J	Date of Birth
Full Legal Name (spell out middle name)			
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Any deceased children with descendants? Yes No Name _____
Are your children and other beneficiaries in good health? Yes No Adopted children? Yes No
Are any of your children financially irresponsible? Yes No Special needs dependent? Yes No

GUARDIANS: For minor children (under 18) who would you want to serve as their Guardian?
(The Guardian has custody of the child, but not necessarily the money. Give full name, Spell out middle names.) 1st _____ 2nd _____
_____ 3rd _____

FINANCIAL MANAGEMENT: In the event that you were mentally disabled or deceased, who would you want to manage your financial affairs? _____ Surviving spouse is usual first choice, Yes No (Circle one) List other choices with full names in order of priority:
 2nd _____ 3rd _____

Do you have any questions or concerns you would like to specifically discuss? _____

If you need more space use the back of this form.

ASSET INFORMATION: Estimated Value Today

Date : _____

<u>ASSETS</u>	<u>Amounts</u>		
	Husband	Joint	Wife
Real estate - home	_____	_____	_____
Real estate - other than home	_____	_____	_____
Cash/Checking/Savings	_____	_____	_____
CDs/Money Market Accounts	_____	_____	_____
Mutual Funds	_____	_____	_____
Stock/Bonds	_____	_____	_____
Employer-Sponsored Retirement Plans	_____	_____	_____
IRAs/Annuities	_____	_____	_____
Business or Partnership Interests	_____	_____	_____
Life Insurance Proceeds	_____	_____	_____
Anticipated Inheritance	_____	_____	_____
Personal Property (vehicles, furniture etc.)	_____	_____	_____
Other	_____	_____	_____
Total Assets	_____	_____	_____

<u>LIABILITIES</u>	<u>Amounts</u>		
	Husband	Joint	Wife
Real estate – mortgages, equity lines	_____	_____	_____
Loans against life insurance	_____	_____	_____
Other debts	_____	_____	_____
Total Liabilities	_____	_____	_____

Net Estate (Total Assets less Total Liabilities) _____

We understand that the Gruber Law Office will rely on the full disclosure of assets and values we provide here to advise us regarding our estate planning and will not be responsible for the accuracy or completeness of the information we have provided.

Signed: _____

