

Are both spouses U.S. Citizens? Yes No

Is there a prenuptial or other agreement with your spouse? Yes No

Were there any prior marriages of you or your spouse? Yes No

If Yes: Are there children from the prior marriage(s) Yes No

Are alimony payments being made Yes No

Are child support payments being made Yes No

Give details of the above _____

CALL IN INFORMATION IN ADVANCE

In addition to filling in this form and bringing it with you to your appointment, please also call in a day or two before your appointment, and let the attorney's staff know the address of any real estate, so that the attorney can obtain copies of deeds before his meeting with you. Done

RELATIVES

Children (including adopted children), Brothers and Sisters, and Parents (if living):

Full Name Full Address and Phone Birth Date (if under 21)

PROPERTY INFORMATION:

Will the estates of Husband and Wife, combined, including trusts that you control or that benefit you, life insurance, possible inheritances, IRAs, etc., exceed one million dollars?

Yes No

\$ _____ expected value

Have you made any gifts of over \$10,000 per individual per year? Yes No

Give details: _____

Is either spouse a trustee of a trust? Yes No

Give details: _____

Real Estate:

Description and Location (ex. "Home, 123 Main Street, Anytown, Oregon")	Ownership (Husband, Wife, Husband and Wife, Other)	Market Value	Mortgage Balance	Net Equity	Cost Basis (Purchase Price, plus Improvements)

Is any of this farm land? Yes No

If it is farmland, is it farmed by you or a member of your family? Yes No

If it is farmland, please give the annual gross cash rental for comparable land: _____

If it is farmland, please give the average annual real property taxes for comparable land.
\$ _____

Investments (Stocks, Bonds, Loans, Mortgages, Certificates, etc.):

Description	Ownership (Husband, Wife, Joint, Other)	Net Value	Cost Basis

Accounts Receivable: (ex. Notes, Mortgages, Land Sale Contracts, etc)

Closely Held Businesses: (Indicate value of interest, and percentage of business held)

Description	Ownership (Husband, Wife, Joint, Other)	Net Value	Cost Basis

Other information about Business Interests

Is it a sole proprietorship? Yes No

Is it a corporation? Yes No

Is it a Sub "S" corporation? Yes No

Is it a partnership? Yes No

If so, is there a partnership agreement? Yes No

Is there a buy-sell agreement? Yes No

Additional information about the business: _____

Bank Accounts and Certificates of Deposit:

Description	Ownership (Husband, Wife, Joint, Other)	Checking (Amount)	Savings (Amount)

Miscellaneous: (Automobiles, Valuable Jewelry, Paintings, Coin Collections, Stamp Collections, etc)

Description	Ownership (Husband, Wife, Joint, Other)	Cost Basis	Current Value

Life Insurance:

Company	Type	Owner	Beneficiary	Alternate Beneficiary	Death Benefit Amount	Policy Loans

Retirement Benefits (Including IRA's, 401K's, Keogh plans, Profit Sharing plans, Annuity plans):

Description	Owner (Husband or Wife)	Beneficiary (if any)	Present value

LIABILITIES: (Notes, Real Estate Mortgages, Installment Land Contracts, Charge Accounts, Installment Loans, Life Insurance Loans, Business Debts, Taxes Payable, Other)

PERSONAL REPRESENTATIVE of WILL (i.e. executor)

Name Address and Phone

First Choice: _____

Second Choice: _____

Third Choice: _____

TRUSTEE(S) OF TRUST FOR YOURSELF/YOURSELVES

Name

Address and Phone

First Choice (often yourself): _____

Second Choice: _____

Third Choice: _____

GUARDIAN (for minor children)

Name

Address and Phone

First Choice: _____

Second Choice: _____

Third Choice: _____

TRUSTEE OR CUSTODIAN (To manage funds for minor children, or Special Needs Trust, or other trust that may later be created by the Will)

Name

Address and Phone

First Choice: _____

Second Choice: _____

Third Choice: _____

DISTRIBUTION OF ESTATE

(Who do you want to receive your assets after you die)

Do you want to make any specific gifts of money or specific assets to specific individuals or charities? Give details: _____

Where do you want the residue of your estate to go after you die?

- If Spouse Survives: _____

- If No Surviving Spouse: _____

- If No Surviving Spouse or Children: _____

If assets go to minors, do you want the assets held in trust? If so, until what age? Can assets be released early for specific purposes (education, business, house, etc.)? _____

POWER OF ATTORNEY (Power allowing someone else to handle your personal financial affairs while you are still alive):

Do you want a Power of Attorney Yes No

Do you want to revoke prior Powers of Attorney? Yes No

If yes, revoke all PoAs, or all general durable, or just a specific one? _____

Attorney-in-Fact:

Name

Address and Phone

First Choice: _____

Second Choice: _____

Third Choice: _____

OTHER DOCUMENTS:

Do you have an Advance Directive for Health Care? Yes No

- Do you want a new Advance Directive for Health Care? Yes No

- If Yes, who should be your Health Care Representative

Name: _____
Relationship to you: _____
Address: _____
Phone: _____

Alternate's Name: _____
Relationship to you: _____
Address: _____
Phone: _____

Second Alternate's Name: _____
Relationship to you: _____
Address: _____
Phone: _____

Third Alternate's Name: _____
Relationship to you: _____
Address: _____
Phone: _____

Do you want to nominate someone other than your spouse to serve as Guardian or Conservator for you if one ever needs to be appointed? Yes No

If Yes:

Name: _____
Address: _____
Phone: _____

Alternate's Name: _____
Address: _____
Phone: _____

Alternate's Name: _____
Address: _____
Phone: _____

Alternate's Name: _____
Address: _____
Phone: _____

OTHER INFORMATION OR COMMENTS (about anything discussed above):

FAMILY ADVISORS:

	Name	Address	Number
Accountant	_____	_____	_____
Insurance Agent	_____	_____	_____
Stockbroker	_____	_____	_____
Banker	_____	_____	_____
Physician	_____	_____	_____
Clergyman	_____	_____	_____
Other	_____	_____	_____

Special Considerations

Are there any especially important or unusual estate planning objectives or problems of you or your spouse?

Are any inheritances or trust distributions likely to be received by either you or your spouse in the future?

Are any persons other than minor children partly or wholly dependent upon you or your spouse for support now or possibly in the future?

At what age or ages (after the death of you, and if applicable, your spouse) do you think your children should receive substantial assets (in addition to distributions to properly provide for their care, support and education)?

Under what circumstances, if any, would you want advancements made to your children before they reach the age listed above? For example, consider events/goals like starting a business, buying or furnishing a home, or attending graduate or professional school.

Do you have any special funeral requests such as cremation, place of burial, type of service you prefer, etc?

Do you have a safety deposit box? If so, where is it, and who has access to the box?