

ESTATE PLANNING DATA

Date: _____

Identification

Name: _____ Place of Birth: _____

Social Security No: _____ Date of Birth: _____

US Citizen: Yes/No e-mail: _____

Home Address: (including County): _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____

Estimated Value of Your Estate

\$ _____	Real Estate (residence, rental property, land, vacation homes, etc.)
\$ _____	Oil & gas interests
\$ _____	401(k), pension plans, annuities, IRAs
\$ _____	Stocks/Bonds/Mutual Funds (not held in retirement accounts)
\$ _____	Cash/Savings
\$ _____	Household furnishings/personal effects/motor vehicles
\$ _____	Life Insurance
\$ _____	Business or partnership interests
\$ _____	Other (Describe: _____)
\$ _____	SUBTOTAL
\$ < _____ >	Estimated Total Debts and Mortgages Owed
\$ _____	TOTAL

Do you own any property outside of Texas? Yes/No

If yes, please describe (location, type, how held) _____

Have you inherited or do you expect to inherit any property? Yes/No

If yes, please describe (location, type, how held) _____

Are you the creator or beneficiary of any trust? Yes/No

If yes, please describe (trust name, date, trustee, grantor) _____

Your Children

<u>Children's Names, Addresses, Telephone Numbers, and Social Security Numbers</u>	<u>Dates of Birth</u>	<u>Name of Child's Other Parent</u>
1. _____ _____	_____	_____
2. _____ _____	_____	_____
3. _____ _____	_____	_____
4. _____ _____	_____	_____
5. _____ _____	_____	_____

If you have more than 5 children, please provide the above information on a separate page.

Your Fiduciaries

List below the name, address, and telephone number of each person (and/or the bank or trust company) that you wish to have serve in the fiduciary capacities indicated. In addition, you may name two persons to serve jointly, you should name alternates, and you may name several alternates.

Executor(s): _____

Trustee(s): _____

Guardian(s)
Minor Children: _____

Agent(s) for
Incapacity: _____

Disposition of Your Property

At our meeting, please plan to describe the way you want your property to pass at your death, keeping in mind any contingent beneficiaries you may want to include in the event the primary beneficiaries do not survive you.

1. Immediate Family Members: _____
2. Extended Family: _____
3. Charities: _____
4. Other: _____

Additional Identification of Family Members

	<u>Grandchildren's Names</u>	<u>Dates of Birth</u>	<u>Born to which Child of Yours</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____

Please provide names of the following family members and, if living, indicate city, state, and country of residence:

Mother: _____

Father: _____

Brother(s): _____

Sister(s): _____

Miscellaneous Information

Employer: _____

Position: _____

Address: _____

Phone: _____ Fax: _____

Military Service: Yes/No If yes, give details (Branch, Dates of Service, Status): _____

If you have ever been married, please furnish the following information as to each marriage:

1. Name of former spouse: _____

2. Date and place of marriage: _____

3. Date of termination of marriage and whether due to death or divorce: _____

4. If you are subject to an ongoing obligation in favor of a former spouse, please describe and provide a copy of the divorce decree or other document. _____

If you are a current or potential party to a lawsuit, please describe: _____

If you are a party to a buy-sell agreement with regard to any company, please describe and provide a copy of each agreement: _____

Do any potential beneficiaries of your estate receive governmental benefits or have any special needs or problems that should be addressed in your estate planning? Yes/No (Please plan to discuss when we meet.)

Other Estate Planning Advisors

Accountant: _____

Primary Personal Bank: _____

Stockbroker or other Investment Advisor: _____

Insurance Agent: _____