

ESTATE PLANNING
INFORMATION SHEET

Date: _____ Husband's nickname: _____

Wife's nickname: _____

1. Husband's Name: _____

(a) Name variations used: _____

2. Wife's Name: _____

(a) Name variations used : _____

3. Address: _____

4. Contact/Telephone: _____

5. Husband's Occupation: _____

6. Wife's Occupation: _____

7. Husband's Date of Birth: _____

8. Husband's Place of Birth: _____

9. Husband's Date California residence commenced: _____

10. Wife's Date of Birth: _____

11. Wife's Place of Birth: _____

12. Wife's Date California residence commenced: _____

13. Date of Marriage: _____

14. Place of Marriage: _____

15. Prior Marriages, if any:

(a) Husband: Yes _____ No _____

Name of former spouse: _____

When terminated: _____

How terminated: _____

(b) Wife: Yes _____ No _____

Name of former spouse: _____

When terminated: _____

How terminated: _____

16. Children of this Marriage:

Name	Birth Date	Address

17. Children of Former Marriages/Relationships:

Name	H/W	Birth State	Birth Date	Address

18. Deceased Children: Yes: _____ No _____

Name: _____ Date of Death: _____

Name: _____ Date of Death: _____

19. Prior Wills: Yes _____ No _____ Location: _____

20. Life Insurance:

	Company	Amount	Term/Ord. Life	Beneficiary
H				
W				
C				

21. Location of Safe Deposit Box and Important Papers:

22. Husband and Wife Business or Occupation: _____
 Business Interests (partnership, corp., etc.) _____
 Employer Name: _____
 Employer Address: _____
 Position held: _____
 Employment Agreement with Employer: _____
23. Inheritance: Husband: _____ Wife: _____
24. Brokerage Accounts [For Items 25-28, please indicate location and approximate value.]

25. Savings Accounts:

26. Real Estate:

27. Other Assets: _____

 Stock: _____
 Collectibles: _____
 Certs of Deposit: _____
28. Advanced Health Care Directive (Who should make health care decisions for you if you cannot do so?)
 First Agent: _____
 Address: _____
 Phone: _____
 Second Agent: _____
 Address: _____
 Phone: _____

29. Trustee(s) (Trust Administrator): _____

30. Executor(s) (Performs duties under Will): _____

31. Guardian(s) for minor children: _____

32. Attorney(s)-in-fact to act for financial matters not controlled by Trust, e.g., IRA, 401(k):

33. Consider ages for distribution of assets to children - we will discuss this in detail when we meet: _____

34. Family members with special needs: children? parents?
