

Confidential Personal Information for Estate Planning

**Individual**

*Husband*

*Wife*

Name	_____	_____
Also known as	_____	_____
Social Security no.	_____	_____
Birth date	_____	_____
U.S. citizen	_____ Y _____ N	_____ Y _____ N
Living parents	_____	_____
Former spouse	_____	_____
Business address	_____	_____
Telephone number	_____	_____
Fax number	_____	_____
E-mail address	_____	_____
Home address	_____	_____
County of residence	_____	_____
Date of marriage	_____	_____

**Children**

Living children (indicate children from prior marriages and adopted children)

<i>Name</i>	<i>Birth date</i>	<i>Social Security no.</i>	<i>No. of children</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Deceased children \_\_\_\_\_

Living children of deceased children \_\_\_\_\_

Note: If there are no living children or grandchildren, list the brothers and sisters (living and deceased) of the husband and the wife.

**Agents and brokers**

Safe-deposit box                   \_\_ Y    \_\_ N    Location \_\_\_\_\_

Accountant                        \_\_ Y    \_\_ N    Name \_\_\_\_\_

Insurance agent                   \_\_ Y    \_\_ N    Name \_\_\_\_\_

Stockbroker                       \_\_ Y    \_\_ N    Name \_\_\_\_\_

**Confidential Property Information for Estate Planning**

**Real estate** (including land contracts)

*Description*

(include owner: H—husband, W—wife, J—joint)

*Mortgage balance*

*Market value*

_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

**Cash** (checking, savings, CD, money market, credit union)

*Location of account* (include owner: H, W, J)

*Amount*

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

**Stocks and bonds** (if in a brokerage account, list firm name)

Listed securities (H) \_\_\_\_\_

Listed securities (W) \_\_\_\_\_

Listed securities (J) \_\_\_\_\_

Closely held (family) securities \_\_\_\_\_

**Life insurance** (include insured, insurance company,  
insurance type, owner, and beneficiary)

*Face amount*

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

**Retirement benefits** (list company) \_\_\_\_\_

IRA (list location, type [Roth, non-Roth], and amount) \_\_\_\_\_

\_\_\_\_\_

**Miscellaneous**

Household furnishings, autos, collections \_\_\_\_\_

Money owed by others to you \_\_\_\_\_

Miscellaneous (trusts, etc.) \_\_\_\_\_

Expected inheritances \_\_\_\_\_

List all gifts made by you over \$3,000 in value (date and beneficiary) \_\_\_\_\_

\_\_\_\_\_

Any gift tax return filed  Y  N Years filed ? \_\_\_\_\_

List significant debts or obligations other than mortgages listed above? \_\_\_\_\_

\_\_\_\_\_