



The Trust And Estate Attorneys

Estate Planning

Personal and Financial Questionnaire

I. PERSONAL/FAMILY DATA

Date: _____

Client 1:

Name (full legal name): _____ Date of Birth: _____

Home Address: _____

Home Phone: _____ Cell Phone: _____ Office Phone: _____

Country of Citizenship: U.S. Other: _____

Occupation: _____

Employer: _____

Work Address: _____

E-Mail Address: _____

Client 2 (if applicable):

Name (full legal name): _____ Date of Birth: _____

Home Address: _____

Home Phone: _____ Cell Phone: _____ Office Phone: _____

Country of Citizenship: U.S. Other: _____

Occupation: _____

Employer: _____

Work Address: _____

E-Mail Address: _____

II. MARITAL STATUS: Married Not Married

III. CHILDREN AND GRANDCHILDREN

1. Name: _____ Date of Birth: _____

Child of: Both Client 1 Client 2 Spouse's Name: _____

Home Address: _____

Children of this Child:

a. Name: _____ Date of Birth: _____

b. Name: _____ Date of Birth: _____

c. Name: _____ Date of Birth: _____

2. Name: _____ Date of Birth: _____

Child of: Both Client 1 Client 2 Spouse's Name: _____

Home Address: _____

Children of this Child:

a. Name: _____ Date of Birth: _____

b. Name: _____ Date of Birth: _____

c. Name: _____ Date of Birth: _____

3. Name: _____ Date of Birth: _____

Child of: Both Client 1 Client 2 Spouse's Name: _____

Home Address: _____

Children of this Child:

a. Name: _____ Date of Birth: _____

b. Name: _____ Date of Birth: _____

c. Name: _____ Date of Birth: _____

4. Name: _____ Date of Birth: _____

Child of: Both Client 1 Client 2 Spouse's Name: _____

Home Address: _____

Children of this Child:

a. Name: _____ Date of Birth: _____

b. Name: _____ Date of Birth: _____

c. Name: _____ Date of Birth: _____

IV. BACKGROUND INFORMATION

1. Client 1

Have you been married previously? YES NO

If yes, please specify how the marriage(s) ended (divorce or death?) _____

If divorced:

■ Was a property settlement agreement entered into? _____

(If yes, please furnish a copy of the property settlement agreement.)

■ Are there any obligations to pay child support, alimony or maintain life insurance? _____

(If yes, please furnish a copy of the support agreement.)

If widowed:

■ Was a federal estate tax return (Form 706) filed for your deceased spouse? _____

(If yes, please furnish a copy of the 706.)

■ Are you the beneficiary of any trusts established by your deceased spouse? _____

(If yes, please furnish a copy of the trust(s).)

Client 2

Have you been married previously? YES NO

If yes, please specify how the marriage(s) ended (divorce or death?) _____

If divorced:

■ Was a property settlement agreement entered into? _____

(If yes, please furnish a copy of the property settlement agreement.)

■ Are there any obligations to pay child support, alimony or maintain life insurance? _____

(If yes, please furnish a copy of the support agreement.)

If widowed:

■ Was a federal estate tax return (Form 706) filed for your deceased spouse? _____

(If yes, please furnish a copy of the 706.)

■ Are you the beneficiary of any trusts established by your deceased spouse? _____

(If yes, please furnish a copy of the trust(s).)

2. If you are married, have you ever entered into a premarital or post-marital agreement? YES NO
(If yes, please furnish a copy of the agreement.)

3. Are any of your children or grandchildren (or other beneficiaries) currently receiving (or are likely to receive) governmental support or benefits as a result of special educational, medical or physical needs? YES NO
If yes, please provide name: _____

4. Have either of you ever filed a gift tax return (Form 709)? YES NO
(If yes, please provide a copy of the 709 return(s).)

5. Are you the beneficiary of any trust established for your benefit? YES NO
(If yes, please provide a copy of the trust(s).)

6. Do you currently have umbrella liability insurance? YES NO

7. Do either of you expect to receive an inheritance?

a. Client 1: YES NO If yes, please estimate amount: _____

b. Client 2: YES NO If yes, please estimate amount: _____

8. Do you have any existing estate planning documents? YES NO

(If yes, please furnish us with copies.)

9. Who referred you to us for estate planning? Friend/family member: _____

Professional advisor: _____

Website: _____

Other (please specify): _____

V. PROFESSIONAL ADVISORS

1. Accountant:

Name: _____ City/State: _____

Phone: _____ Email address: _____

2. Investment Advisor/Financial Planner:

Name: _____ City/State: _____

Phone: _____ Email address: _____

3. Life Insurance Agent:

Name: _____ City/State: _____

Phone: _____ Email address: _____

4. Other:

Name: _____ City/State: _____

Phone: _____ Email address: _____

VI. AUTHORIZATION TO DISCUSS FINANCIAL INFORMATION

I hereby authorize Vaughan, Fincher & Sotelo, PC, to communicate with any of the professional advisors referenced above regarding my estate plan, until I notify Vaughan, Fincher & Sotelo, PC otherwise.

Client 1 Signature

Client 2 Signature

VII. KEY PEOPLE IN ESTATE PLAN

Note: Spouses do not necessarily have to choose the same key people. Additionally, we recognize that you may not have made decisions regarding the names requested here before your initial meeting with us. We will discuss this section further with you.

A. Trustee(s) of Revocable Living Trust - *Someone to manage your assets if you are disabled or die (i.e., adult children, other family members, trusted friends and/or a professional trustee)*

Client 1		Client 2	
Initial	_____	Initial	_____
1st Successor	_____	1st Successor	_____
2nd Successor	_____	2nd Successor	_____

B. Executor(s) of Will - *Someone to administer your will through the court system, if applicable upon your death (i.e., adult children, other family members, trusted friends and/or a professional executor)*

Client 1		Client 2	
Initial	_____	Initial	_____
1st Successor	_____	1st Successor	_____
2nd Successor	_____	2nd Successor	_____

C. Guardian(s) for Minor Children - *Someone to care for your children if something happens to you or your spouse*

Client 1		Client 2	
Initial	_____	Initial	_____
1st Successor	_____	1st Successor	_____
2nd Successor	_____	2nd Successor	_____

D. Agent(s) in Durable General Power of Attorney - *Someone to make financial and administrative decisions for you*

Client 1		Client 2	
Initial	_____	Initial	_____
1st Successor	_____	1st Successor	_____
2nd Successor	_____	2nd Successor	_____

E. Agent(s) in Advance Medical Directive - *Someone to make health and medical care decisions for you if you become incapacitated*

Client 1		Client 2	
Initial	_____	Initial	_____
1st Successor	_____	1st Successor	_____
2nd Successor	_____	2nd Successor	_____

VIII. ASSETS AND LIABILITIES—approximate

ASSETS (use estimated current fair market value)

Real Property

	Ownership	Address	Value	Mortgage	Total Equity
Primary Residence					
Secondary Residence					
Rental Property					
Rental Property					
Unimproved Land					

Total Equity in Real Property: \$ _____

Cash Accounts (checking/savings/money market/certificate(s) of deposit)

Type of Account	Owner(s)	Financial Institution	Balance

Total Value of Cash Accounts: \$ _____

Taxable Investment Accounts (stocks/bonds/mutual funds)

Type of Account	Owner(s)	Financial Institution	Balance

Total Value of Taxable Investment Accounts: \$ _____

Life Insurance Policies

Company	Owner	Insured	Term/Permanent	Beneficiary	Cash Value	Death Benefit

Total Value of Death Benefits: \$ _____

Qualified Retirement Plans (401k/IRA/TSP,etc.)

Type of Account	Owner	Value	Beneficiary	Contingent Ben.	Financial Institution

Total Value of Qualified Retirement Plans: \$ _____

Business Interests (LLC/Partnership/Corporations)

Business Name	Type of Entity (LLC/ Corp., etc.)	Owner(s)	State Formed	Percentage Ownership	Value of Interest

Total Value of Business Interests: \$ _____

Other Assets

	Owner(s)	Beneficiaries (if applicable)	Value
Tangible Personal Property (cars, jewelry, etc.)		n/a	
Stock Options			
Notes Receivable			
Annuities			
Deferred Comp.			

Total Value of Other Assets: \$ _____

TOTAL ASSETS \$ _____

LIABILITIES

Loans (car, student, credit card, etc.)

Type	Lender	Loan Balance

TOTAL LIABILITIES \$ _____

CURRENT NET WORTH (total assets less total liabilities): \$ _____

PRIVACY POLICY NOTICE

Pursuant to the Gramm-Leach-Bliley Act, Public Law Number 106-102, and the rule issued by the Federal Trade Commission regarding the Privacy of Consumer Financial Information, 16 Code of Federal Regulations Part 313, law firms which provide tax preparation and tax planning services to their clients are categorized as financial service providers and are required to provide written notice to certain clients regarding disclosure of non-public personal information.

Information We Collect

As attorneys, we may collect certain non-public personal information about our clients from our clients, and with their authorization, from third parties such as accountants, financial advisors, insurance agents, financial institutions and other advisors.

Parties to Whom We Disclose Information

We do not disclose any non-public personal information about our clients or former clients to anyone except as required by law, or as authorized by that client.

Confidentiality and Security of Your Personal Information

Except as otherwise stated in this notice, we restrict access to non-public personal information about our clients to those attorneys and other employees of our firm who must use that information in order for our firm to provide services to you. We also maintain physical, electronic and procedural safeguards designed to comply with applicable laws and regulations and our rules of ethics to guard your personal information from unauthorized access or alteration.

The above-referenced federal laws and regulations establish rules and disclosure requirements and do not limit the attorney-client privilege or the confidentiality rules for information provided to attorneys. The privilege and confidentiality rules are governed by applicable state or District of Columbia law, the rules imposed on attorneys under state or District of Columbia law, and our ethical standards. In circumstances where applicable federal law might allow disclosure, we will continue to follow any stricter non-disclosure rules of attorney-client privilege and client confidentiality.



Thank you for allowing us to serve your estate planning, estate administration or trust administration needs. We value your business and are committed to protecting your privacy. We hope you view our firm as a trusted advisor and we will work to continue earning your trust. Please contact us if you have any questions or if we can be of further service.