



ESTATE PLANNING INTAKE QUESTIONNAIRE

Date _____

Referred By: _____

Client 1 Name: _____

Address: _____

Phone: (____)____ - _____ (Type: _____)

Phone: (____)____ - _____ (Type: _____)

Email: _____

Occupation: _____

Client 2 Name: _____

Address: _____

Phone: (____)____ - _____ (Type: _____)

Phone: (____)____ - _____ (Type: _____)

Email: _____

Occupation: _____

Description of Legal Matter:

Insurance: Do you have ARAG legal insurance? Yes No If so, is your spouse/partner included in your coverage? Yes No Do Not Know

FAMILY INFORMATION

MARRIAGE:

1. Are you married? Yes No
2. Have you or your spouse/partner been previously married? Yes No

If yes, please indicate the following information:

Client Name: _____
Previous Spouse's Name: _____
Marriage terminated by Dissolution Death on _____ (date or approximate date)

Client Name: _____
Previous Spouse's Name: _____
Marriage terminated by Dissolution Death on _____ (date or approximate date)

Client Name: _____
Previous Spouse's Name: _____
Marriage terminated by Dissolution Death on _____ (date or approximate date)

CHILDREN:

Child's Name	Birth Date	Age	Child Of:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Do you have any deceased children? Yes No

If yes, please provide the following information:

Child of: _____ Date of Birth: _____ Date of Death: _____
Did the deceased child have children? Yes No

ASSET INFORMATION

It is **crucial** you provide all asset information. This will allow Bolander Law Group to (1) assess your estate tax liability and (2) advise you on how to hold title to assets. These asset pages will be discussed in depth at your initial Estate Planning meeting. Please indicate your current net worth, broken down as follows:

REAL PROPERTY:

Address:

Fair market value \$ _____
Mortgage: \$ _____
NET: \$ _____

Fair market value \$ _____
Mortgage: \$ _____
NET: \$ _____

Fair market value \$ _____
Mortgage: \$ _____
NET: \$ _____

Check box if you have additional real property and attach information.

Banking Institution(s):

Type of Account

Average Balance

Example: Wells Fargo

Checking/Savings

\$1,500/\$7500

Check box if additional banking information is attached

Investments & Institution

Type of Account

Value

(List all CDs, Stocks, Bonds, Mutual Funds, Securities, etc.)

Check box if additional investment information is attached

Retirement & Insurance

Type of Account/Policy

Value/Death Benefit

(List all IRAs, employee retirement, 401(k)s, life insurance, etc.)

Check box if additional retirement/insurance information is attached

Business Interests: *(LLCs, Sole Proprietorships, Corporations, Partnerships)*

Type of Entity:

Stock or Ownership Interest:

Partners, Members or Shareholder/Director(s)' Names: _____

Buy/Sell Agreement? Yes No

Number of Employees: _____

HEALTH CARE DECISIONS
(for your Advanced Health Care Directive)

Your Advanced Health Care Directive will control all your health care decisions.

Who would you like to make health care decisions for you if you could not make them for yourself?

(Client Name – CLIENT 1)

(Client Name – CLIENT 2)

Spouse/Partner is first Agent

Spouse/Partner is first Agent

Agent's Name

(1) _____

(2) _____

(3) _____

Agent's Name

(1) _____

(2) _____

(3) _____

Do you want life support? **CLIENT 1:** ___Yes ___No

CLIENT 2: ___Yes ___No

Feeding tubes? **CLIENT 1:** ___Yes ___No

CLIENT 2: ___Yes ___No

Do you want pain medication even if it may hasten your death?

CLIENT 1: ___Yes ___No **CLIENT 2:** ___Yes ___No

Would you like to donate any organs?

CLIENT 1: ___Yes ___No **CLIENT 2:** ___Yes ___No

CLIENT 1: Transplant Education Research Therapy Any purpose

CLIENT 2: Transplant Education Research Therapy Any purpose

CLIENT 1: Any needed Other: _____

CLIENT 2: Any needed Other: _____

CLIENT 1: Burial Cremation Other: _____

CLIENT 2: Burial Cremation Other: _____

Lori will go over this form in detail with you at the meeting, so if you have any questions or concerns regarding this questionnaire, they will be addressed then.