

CONFIDENTIAL ESTATE PLANNING QUESTIONNAIRE



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Although this form may seem overwhelming at first, it is intended to walk you through the contents of your estate as thoroughly as possible to avoid failing to address potential issue during analysis. In reviewing this questionnaire you should not complete any unnecessary schedules. A checklist of documents is attached as a convenient reminder to you of the documents which we may need to review in analyzing your estate. Please try to hold your answers to brief reminders that you can expand upon in your meeting with us. Use abbreviations wherever clear and helpful to you. If you have any questions, please do not hesitate to call. You (and your spouse, if applicable) should not forget to sign the questionnaire on page five (5). It is preferable that this form be returned at least several days before we sit down and meet together for the first time.

With respect to the schedules that are attached, **PLEASE COMPLETE THEM THOROUGHLY IF CALLED FOR BY THE QUESTIONNAIRE BUT WITHOUT EXCESSIVE DETAIL. PLEASE PREPARE YOURSELF TO EXPLAIN AND DEMONSTRATE DETAILS OF THE SCHEDULES WHEN YOU MEET WITH US TO GO OVER THESE MATTERS. PLEASE STRIKE THROUGH ANY SCHEDULE THAT MIGHT NOT APPLY SO WE KNOW THAT YOU HAVE ADDRESSED THE QUESTION PRESENTED.**

Please note, we cannot possibly know enough to cover every possible item of interest or special situation or desire peculiar to you (and your spouse's, if applicable) personal situation and desires. Because of this, please think your situation through and be alert to call all matters to our attention that you know about and think might be important for us to know. It is unwise to rely upon the questions set forth herein or posed by us in meetings. Planning for your (and your spouse's, if applicable) estate is a teamwork job and we need each other's full attention and care to do a good job.

You should be aware that although planning for you (and your spouse's, if applicable) estates will affect and provide for your beneficiaries, our representations extend solely to you (and your spouse, if applicable) unless we have otherwise agreed in writing.

GENERAL INFORMATION

FULL NAME, SOCIAL SECURITY NUMBER, BIRTH DATE, CITIZENSHIP, PARENTAL INFORMATION, PRIOR MARRIAGES AND COMMUNITY PROPERTY STATE INFORMATION OF CLIENT:

In completing this form, kindly supply proper names - given first name, middle initial or name, and last name. If known by any other name, please supply. Please supply supplemental sheets for any additional information.

Names to be used	Residence	Age or Date of Birth	Citizen of US
H _____	_____	_____	_____

W _____	_____	_____	_____

SS # H _____ SS# W _____

Any Prior Marriages: Y N

Former Spouses _____

Terminating Date(s) _____

Have you ever lived in a Community Property state: Yes No

Community Property state information:

Home Address: _____ CPS Home Telephone No. _____

PRELIMINARY STATEMENT OF ESTATE PLANNING

OBJECTIVES

In your own words, please state what your present thinking is about what you would have wanted to happen to your assets, particularly any special gifts of particular assets, charitable wishes, etc. and any desires with respect to your remains, should you have passed away last week:

In your spouse's own words, please state what your spouse's present thinking is about what your spouse would have wanted to happen to your spouse's assets, particularly any special gifts of particular assets, charitable wishes, etc. and any desires with respect to your spouse's remains, should your spouse have passed away last week:

13. Do you or your spouse own a life insurance policy? If yes, please complete Schedule K. Y N
14. Are there any insurance policies on either you or your spouse's life, e.g., "key-man" insurance policies or policies owned by a lender to secure payment of a loan? If yes, please complete Schedule K. Y N
15. During your lifetime(s) have you or your spouse ever established a trust, contributed anything to a trust or had the power to appoint or otherwise dispose of any interest in a trust? If yes, please complete Schedule L. Y N
16. Are you or your spouse now or do you or your spouse expect to receive any benefit from a trust other than a trust established by an employer under a pension plan? If yes, please complete Schedule L. Y N
17. During any calendar year prior to January 1, 1982, did you or your spouse make a gift or gifts the total of which exceeded for that year \$3,000.00 per person? If yes, please complete Schedule M. Y N
18. During any year after December 31, 1981 did you or your spouse make a gift or gifts the total of which exceeded that year \$10,000.00 per person? If yes, please complete Schedule M. Y N
19. Do you or your spouse have any charitable gifts or bequests in mind or are you or your spouse interested in discussing charitable gifting? If yes, please complete Schedule M. Y N
20. Do you or your spouse have any liabilities, either in individual or joint names, which are not listed on another schedule, that exceed \$1,000.00, e.g. accounts payable? If yes, please complete Schedule N. Y N
21. Are there presently any judgments, court orders, divorce, alimony or support decrees or liens entered against either you or your spouse? If yes, please complete Schedule N. Y N
22. Have you or your spouse ever given a personal guaranty, surety agreement or a pledge of your assets to secure the obligations of persons other than yourself that is currently outstanding and not listed previously? If yes, please complete Schedule N. Y N
23. Are you or your spouse a general partner in a partnership, a joint venturer in a joint venture, a trustee in a trust of any type or participant in any personal business transactions, which involve or could involve any personal liabilities for you that have not been listed previously? If yes, please complete Schedule N. Y N

SIGNATURES

We acknowledge that the foregoing information is true and that the representation of us by BARBARA M. PIZZOLATO, P.A. is conditioned on the truthfulness of the representations contained in this questionnaire.

Furthermore, each of us acknowledges our awareness about and waives any conflict of interest that BARBARA M. PIZZOLATO, P.A. or any of its attorneys will have in representing each of us on our estate plans, which are related to one another. Each of us knows that we are entitled to retain independent counsel of our own. Each of us authorizes BARBARA M. PIZZOLATO, P.A. to share whatever information it has obtained or may later obtain concerning the estate plan of either one of us with the other. Each of us is fully aware of the proposed estate plan of the other and has no objection to it. We also agree that BARBARA M. PIZZOLATO, P.A. is authorized to inform the other about any subsequent change that we make in our estate plan and to discuss, explain and/or advise concerning the change with the other, but shall be under no duty to do so. In addition, anything that BARBARA M. PIZZOLATO, P.A. learns about one of us is subject to its disclosure to the other and may be legally imputed to the other as a matter of law, even in the absence of our personal knowledge on the subject.

Date

Date

**SCHEDULE A
CHILDREN AND OTHER DEPENDENTS**

NAME, ADDRESS AND BIRTH DATE OF CHILDREN OF BOTH CLIENT AND SPOUSE
(PLEASE INCLUDE NAME OF CHILD'S SPOUSE, IF ANY AND ANY CHILDREN OF
CHILD - ATTACH ADDITIONAL SHEETS AS NEEDED):

*Note: Please include deceased children, but indicate (D) after name. Please also indicate
adopted children by indicating (A) after name.*

CHILDREN WITH PRESENT SPOUSE:

First	Middle	Last	SS #
-------	--------	------	------

Street Address, Town, State, Zip Code

Name of Spouse (if applicable)

First	Middle	Last	SS #
-------	--------	------	------

Street Address, Town, State, Zip Code

Name of Spouse (if applicable)

First	Middle	Last	SS #
-------	--------	------	------

Street Address, Town, State, Zip Code

Name of Spouse (if applicable)

First	Middle	Last	SS #
-------	--------	------	------

Street Address, Town, State, Zip Code

Name of Spouse (if applicable)

First Middle Last

SS #

Street Address, Town, State, Zip Code

Name of Spouse (if applicable)

CHILDREN WITH OTHER THAN PRESENT SPOUSE:

First Middle Last

SS #

Street Address, Town, State, Zip Code

Name of Spouse (if applicable)

First Middle Last

SS #

Street Address, Town, State, Zip Code

Name of Spouse (if applicable)

First Middle Last

SS #

Street Address, Town, State, Zip Code

Name of Spouse (if applicable)

First Middle Last

SS #

Street Address, Town, State, Zip Code

Name of Spouse (if applicable)

CHILDREN OF CHILD WITH SPOUSE OR OTHER (GRANDCHILDREN) (LIST NAME(S) AND AGE(S)):

First

Middle

Last

SS #

Street Address, Town, State, Zip Code

Name of Spouse (if applicable)

First

Middle

Last

SS #

Street Address, Town, State, Zip Code

Name of Spouse (if applicable)

First

Middle

Last

SS #

Street Address, Town, State, Zip Code

Name of Spouse (if applicable)

OTHER DEPENDENTS (NOT LISTED ABOVE):

First

Middle

Last

SS #

Street Address, Town, State, Zip Code

Name of Spouse (if applicable)

First

Middle

Last

SS #

Street Address, Town, State, Zip Code

Name of Spouse (if applicable)

**SCHEDULE B
GUARDIANS AND CONSERVATORS**

If a child is under the age of 18 and if both parents should die, then the court will appoint a guardian of the person and a guardian or conservator of the property for that child. Often a single person or couple serves in both capacities. A parent may nominate those guardians in their will, and the court will give weight (but will not be bound) by that nomination. Please indicate your present thinking with regard to a guardian for a minor child or children as follows:

NAME, ADDRESS AND RELATIONSHIP TO YOU OF PROPOSED GUARDIAN(S) OF THE PERSON:

First

Middle

Last

Street Address, Town, State, Zip Code

Name of Spouse (if applicable)

Relationship

First

Middle

Last

Street Address, Town, State, Zip Code

Name of Spouse (if applicable)

Relationship

NAME, ADDRESS AND RELATIONSHIP TO YOU OF PROPOSED GUARDIAN(S) OR CONSERVATOR(S) OF THE PROPERTY (IF DIFFERENT FROM ITEM 1 ABOVE):

First Middle Last

Street Address, Town, State, Zip Code

Name of Spouse (if applicable)

Relationship

First Middle Last

Street Address, Town, State, Zip Code

Name of Spouse (if applicable)

Relationship

NAME, ADDRESS AND RELATIONSHIP TO YOU OF ALTERNATE GUARDIAN(S) OR CONSERVATOR(S):

First Middle Last

Street Address, Town, State, Zip Code

Name of Spouse (if applicable)

Relationship

First Middle Last

Street Address, Town, State, Zip Code

Name of Spouse (if applicable)

Relationship

**SCHEDULE C
FAMILY ADVISORS**

Please list the name, address and telephone number of all of your family advisors (if applicable).
Add any pages if necessary.

ACCOUNTANT(S):

First Middle Last

Street Address, Town, State, Zip Code

Telephone Number

LIFE INSURANCE AGENT(S):

First Middle Last

Street Address, Town, State, Zip Code

Telephone Number

STOCKBROKER(S):

First Middle Last

Street Address, Town, State, Zip Code

Telephone Number

TRUST OFFICER(S):

First Middle Last

Street Address, Town, State, Zip Code

Telephone Number

ATTORNEY(S):

First Middle Last

Street Address, Town, State, Zip Code

Telephone Number

OTHER:

First Middle Last

Street Address, Town, State, Zip Code

Telephone Number

**SCHEDULE D
CASH**

On Hand and in Named Bank	Type of Account, include Cds, IRA's and other funds managed by Bank	Names on Account	Estimated Normal Balance
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**SCHEDULE E
TANGIBLE PERSONAL PROPERTY**

Include all autos and all substantial items of household furnishings and personal belongings (estimate collective value) owned by you and your spouse that you deem important enough to single out for special consideration, e.g., your boat, a special gun collection, a valuable painting or piano, etc. It may be helpful for you to establish a minimum fair market value necessary for individual items to be listed separately, e.g., \$2,000 - attach additional sheets as necessary.

List of Particular Items or Classes of Property and Location Thereof	Exact Name(s) of Owner(s) and Types of Ownership	Cost at date of acquisition, if known	Estimated Present Value
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**SCHEDULE F
INTANGIBLE PERSONAL PROPERTY**

This type of property includes all interests, rights, licenses, leases, contracts, insurance policies, club memberships, favorable law suits, accounts and notes receivable, patents, copyrights, trademarks, service marks, stocks, mutual funds, bonds, debentures, and mortgages receivable and any other intangible assets whether or not carried on your balance sheet at all, which are owned by you and/or your spouse and value only estimated numbers of shares, interests or dollar amounts, unless and until exact transfer documents are prepared. Attach additional sheets as necessary.

List of Particular Items or Classes of Property and Location Thereof	Exact Name(s) of Owner(s) and Types of Ownership	Cost at date of acquisition, if known	Estimated Present Value
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**SCHEDULE G
REAL ESTATE**

Describe all real estate interests owned by you and your spouse, including oil and gas wells, mines, farms, etc. and the legal nature of your and your spouse's ownership.

Property Description (e.g., residence, unimproved acreage, industrial or business property, types of ownership interests, name(s) of owner(s), etc.)	Location (county, state and country, if foreign)	Cost or Value at Date of Acquisition	Title Owner(s)	Estimated Current Market Value
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**SCHEDULE H
BUSINESS AND EMPLOYMENT INTERESTS**

Please describe all business interests of any consequence owned by you and your spouse, including any liabilities associated therewith. Attach on a separate sheet to summarize any relevant securities, contracts, employment agreements, options, proxies, voting trusts, restrictions, plans,

litigation, liens, rights, obligations, etc. that are necessary for an understanding of these economic interests.

Types of Interest: Securities, Deferred Compensation, Insurance Rights, etc. and any Special Aspects, Risks or Limitations Thereon	Description of Business (Name and Type)	Exact Owner(s)	Estimated Value of Interest Owned
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**SCHEDULE I
PENSION, PROFIT SHARING, AND OTHER EMPLOYEE BENEFITS**

Please describe all of your and your spouse's employment benefits.

Company Name	Type	Other Benefits	Death Benefits
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**SCHEDULE J
INDIVIDUAL RETIREMENT ACCOUNTS AND ANNUITIES**

Please describe all of your and your spouse's individual retirement accounts and annuities.

Name	Type	Custodian	Designated Beneficiary	Balance
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**SCHEDULE K
LIFE INSURANCE**

Please describe all of the life insurance on your and your spouse's lives.

Person Whose Life Is Value Insured	Insurance Company	Policy Owner(s)	Approximate Amount of Loan Against the Policy, if any	Beneficiary	Face (Principal & Contingent)
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

**SCHEDULE L
TRUST INTERESTS**

During your and your spouse's lifetimes, have either of you ever established a trust, been a beneficiary of any trust, contributed anything to a trust or had the power to appoint or otherwise dispose of any interest in a trust? Please describe briefly.

Do you and/or your spouse now receive or do you and/or your spouse expect to receive any benefit from a trust or an estate, other than a trust established by anyone under a pension or a profit-sharing plan? Please describe briefly.

**SCHEDULE M
GIFTING**

During any calendar year prior to January 1, 1982, did you or your spouse make a gift or gifts the total of which exceeded for that year \$3,000.00 per person or make any gifts to persons other than your spouse or your own children? Please describe, including gifts to any grandchildren.

During any calendar year after December 31, 1981, did you or your spouse make a gift or gifts the total of which exceeded for that year \$10,000.00 per person or make any gifts to persons other than your spouse or your own children? Please describe, including gifts to any grandchildren.

Do you have any charitable gifts or bequests in mind or are you or your spouse interested in discussing some of the major advantages of charitable gifting?

**SCHEDULE N
LIABILITIES**

Please cover all material liabilities owed by you and your spouse. If you and/or your spouse are insolvent or cannot pay all of your bills as they come due, please let us know.

Describe Type, Name of Any Co-Obligor(s), When Due, Any Litigation, Any Defenses, Counterclaims, or Contingencies, etc.	Type and Approximate Value of Property Which Secures Particular Debts, if any	Name(s) of Creditor(s)	Estimated Amounts
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

CHECKLIST OF DOCUMENTS FOR YOU TO CONSIDER FOR EXAMINATION IN CONNECTION WITH PREPARATION OF YOUR AND YOUR SPOUSE'S ESTATE PLAN

The following is a checklist of documents that will need to be reviewed in connection with the preparation of your and your spouse's estate plan. If you or your spouse have any of these documents or any other document that might be material to us or to you and/or your spouse, please bring them to our attention before we begin preparation of your and your spouse's estate plan. The particular location of any item should be noted for us. These documents will not necessarily be reviewed by us, unless you provide them to us and specifically request us to do so.

1. Present and prior wills;
2. Present and prior trust instruments, conservator, custodian, guardian, investment advisor or any other asset management or possession contracts under which you, your spouse, or any child of yours is either grantor, trustee or beneficiary or holds any rights or powers;
3. Gift tax returns (all) and nature and extent of lifetime gifts, including amounts, name of donees and relationship to you and your spouse, dates and types of property gifted;
4. Your and your spouse's most recent financial statement(s);
5. Real and personal property tax bills, recent and any past due, with or without liens;
6. Deeds to and other interests in real estate currently owned by you and your spouse in whole or in part;

7. Promissory notes for which you and/or your spouse are the creditor and any mortgages, other security interests or pledges securing those notes;
8. Promissory notes which you and/or your spouse are the debtor and any mortgages, other security interests or pledges securing those notes (for example, your home mortgage, if any);
9. Last monthly or quarterly statements issued by each financial institution in which you and/or your spouse hold an account, including banks, brokerage firms, credit unions, mutual funds, savings and loan associations;
10. Securities owned by you and/or your spouse of record or beneficially, including any certificates evidencing them in your and/or your spouse's possession, including such things as stocks, mutual fund shares, warrants, debentures, promissory notes, bonds, whether government, municipal and corporate bonds, photocopies of such certificates and investment letters and pledge and purchase/sale agreements;
11. Life and/or disability insurance policies, whether individually owned or group, together with the documents showing primary and contingent beneficiaries;
12. Annuities, including beneficiary designation documents, if any;
13. Savings account passbooks and certificates of deposit;
14. Business, stockholder, limited liability company or partnership agreements (for example, restricted securities, option, voting, proxy, "buy-sell", operating and employment agreements);
15. Documents pertaining to pension and profit-sharing plans, stock purchase and bonus plans, stock option plans, ESOPs, SEPs, 401(k) plans, life and/or disability insurance and annuity plans, IRA accounts and any other employee benefit and/or deferred compensation plans, including data showing ownership, currently vested values, death benefits and beneficiaries;
16. Leases, loans and/or licenses of real and personal property (including cash and intangible assets), showing nature of property, lessee and lessor and location;
17. Instruments under which you and/or your spouse have any right, title or interest or holds any power of appointment or power of attorney;
18. Prenuptial or postnuptial agreements or separation, alimony and property settlement agreements;
19. Divorce, alimony, child support or related decree(s);
20. Court orders, injunctions, or agreements under which you or your spouse are obligated to provide support to another person;

21. Inventories and supplies of tangible and intangible property, whether or not it is being held for sale or finished goods or raw materials (for example, safe deposit box inventories, brokerage account inventories - street name securities, patents, copyrights, trademarks, service marks, bonds, books, tools, fixtures, equipment, investment portfolios, etc.) showing any appraisals or other basis of evaluation, basis for tax purposes, name(s) in which assets are held and nature of you and your spouse's legal interest therein):
22. Outstanding judgments, awards, injunctions, court orders, and/or decrees against you and/or your spouse;
23. Outstanding guarantees or suretyship obligations against you and/or your spouse;
24. Outstanding liens upon any property of you and/or your spouse;
25. Positions held by you and your spouse, e.g., corporate officers or director, general partner or limited partner, member or manager, trustee, agent, ward, guardian, conservator, personal representative, licensee, licensor, landlord, tenant, elected official, consultant, beneficiary, shareholder, creditor, debtor, co-obligor, surety, guarantor or custodian under the Uniform Gifts to Minors Act or similar legislation.
26. Any document, contract, policy or record not within a category described above that evidences you or your spouse's ownership of any asset (regardless of location) in whole or in part or that controls the disposition at your or your spouse's death of any asset that you or your spouse own in whole or in part; and
27. any document, contract, policy or record not within a category described above that evidences any indebtedness or liability of you or your spouse to anyone, including without limitation, any tax obligations, both liquidated and un-liquidated contractual duties to perform and loan documents.

Additional Information: