The Law Offices of
Nathan L. Townsend, P.A.

Nathan L. Townsend, LLM
9385 North 56th Street, Suite 202
Tampa, Florida 33617
Phone: 813.988.5500
Toll Free: 866.988.5999
Fax: 813.988.5510

CONFIDENTIAL ESTATE PLANNING QUESTIONNAIRE

NAME OF CLIENT:
DATE:
APPOINTMENT: TBD

This questionnaire has been developed for use by this firm in order to design comprehensive estate plans for clients. The information that you provide on this form will be retained in our files and no information will be released to any person without your prior permission.

INTRODUCTION

This form should be filled out as completely as possible, and forwarded to The Law Offices of Nathan L. Townsend, P.A. for review prior to a personal conference. Although reasonable value approximations are acceptable, it is important to be certain of the identity of assets and how they are owned. The form provides for identification of assets as owned solely by husband, solely by wife, as community property or in joint tenancy. However, please note where other conditions exist, such as tenancies in common or community property with rights of survival.

Prior to the conference, you also should consider (but need not answer on this form) the following questions, to the extent they are applicable to your situation:

1. Guardian for Minor Children. If you have children under age 18, who would you want to serve as guardian to take care of them and see to their upbringing and education in the event of your death? What about a successor guardian if the first doesn't act? Would you want the same individuals to manage their property?

2. Personal Representative. Who would you want to be the personal representative of your will? This is the person or bank in charge of paying final debts and taxes and distributing your estate as directed in your will.

3. Trusts and Trustees. Trusts often are utilized for tax savings and asset management, either as part of a will, or in addition to a will. If trusts are appropriate for you (and trusts might be of long-term duration), who would you want to be the trustee (or co-trustees): A bank? An individual such as your spouse, brother or sister, child or friend? A combination or a bank and an individual? Who would be the successor trustee if the initial trustee fails or ceases to act?

4. Specific Gifts. Do you wish to provide in your estate plan for cash gifts, or gifts of other specific property, to individuals or charity? If so, you should make a list of such individuals and organizations, paying careful attention to exact given names, spellings and addresses.

5. Disaster. If all members of your immediate family are deceased, to what individuals or charities should your assets be given?

<u>ESTATE PLANNING QUESTIONNAIRE</u>

Section I: General Information

A. Name:

Full Name: ____

Names, other than the name set forth above, by which you have been or are now known: ____

B. Address:

Permanent Address:____

____

County of Residence: ____

Mailing Address (if different than above): ____________________________

____

Email Address:____

C. Telephone Numbers:

Home: __________________________________

Work: __________________________________

Mobile:__________________________________

Fax: ____________________________________

D. Social Security Number: ____

E. Birth:
Date of Birth: ______________________________

Place of Birth: ____
(City, State, or Province, Country)

F. Citizenship:

Citizen of United States? Yes ____ No _____

If not Citizen of United States, citizen of what country? _________________

Lawful Permanent Resident of United States (ie, Green Card) Yes ___ No ___

Alien Certificate of Registration Number, if any:_______________________

Section II: Family Information

A. Current Marital Status (check all that apply):

Married ___ Divorced ___ Separated ____ Widowed ____ Single ___

B. If Married:

Name of Spouse: ____

Spouse's Date of Birth: ____

Date of Marriage: ____

Address of Spouse, if different: _____________________________________

____

Spouse's Social Security Number: ___________________________________

Spouse's Employer: ____

Spouse's Employer Address: _______________________________________

Spouse previously married? Yes ____ No ____

Name of Prior Spouse: ____

Date of termination of prior marriage: _____________________________

Are you party to an antenuptial or postnuptial agreement? Yes ___ No _____

Location of Agreement: ____

C. Next of Kin: (Include children born out of wedlock, adopted children and children of deceased spouse)

Name: ____

Address: ____

Date of Birth: ______________________________________

Relationship:____

Telephone : ____

Name: ____

Address: ____

Date of Birth: ______________________________________

Relationship:____

Telephone : ____

Name: ____

Address: ____

Date of Birth: ______________________________________

Relationship:____

Telephone : ____

Name: ____

Address: ____

Date of Birth: ______________________________________

Relationship:____

Telephone : ____

Section III: Military Service

A. United States Military Service? Yes ____ No ____

B. Military Service in Foreign Country? Yes ____ No ____

Country? ____

If Discharged, location of Discharge Papers? _________________

Section IV: Employment and Employment Benefits

A. If Employed:

Name of Employer: ____

Address: ____

Employment Agreement? Yes ____ No ____

Employment Benefits: (specify company, amount, beneficiary)

Health and Accidental Insurance: _________________________________

Life Insurance: ____

Pension: ____

Profit Sharing: ____

Stock Options: ____

Other benefits: ____

B. If Retired:

Name of Previous Employer: ______________________________________

Address: ____

Date of Retirement: ____

Retirement/Pension Plans? (Please list, if any)

____
____
____

Section V: Safe Deposit Boxes

A. Box Number, and Name of Bank or Trust Company where located & branch:

a. ______________________________

b. ______________________________

c. ______________________________

B. For each box, please list contents:

a. ______________________________

b. ______________________________

c. ______________________________

C. Persons entitled to enter box:

a. ______________________________

b. ______________________________

c. ______________________________

Section VI: Bank and Credit Union Accounts

A. Account Number, Bank, Branch, Approx. Balance

a. ______________________________

b. ______________________________

c. ______________________________

B. For each account above, please list:

a. Type of Account:

i. ______________________________

ii. ______________________________

iii. ______________________________

b. How account is titled:

i. ______________________________

ii. ______________________________

iii. ______________________________

Section VII : Insurance

A. Life Insurance:

a. Company ____
b. Policy No.____________________ Face Amount:__________________
c. Insured ____
d. Owner ____
e. Beneficiary____

a. Company ____
b. Policy No.____________________ Face Amount:__________________
c. Insured ____
d. Owner ____
e. Beneficiary____

B. Other Insurance:

a. Company____
b. Policy No. ______________________ Kind & Amount_______________

a. Company____
b. Policy No. ______________________ Kind & Amount_______________

a. Company____
b. Policy No. ______________________ Kind & Amount_______________

Section VIII: Real Property

A. Location Description

a.____
b.____
c.____
d. ____

B. How are the property(s) listed above titled:

a.____

b.____

c.____

d. ____

C. Purchase Price/Present Value/Mortgage:

a.____

b.____

c.____

d. ____

Section IX: Securities or Brokerage Accounts

Name of Brokerage Accounts (indicate firm & balance)

a.____

b.____

c.____

d.____

e.____

Section X – Online Assets: Mark if applicable *

Facebook ___ Email Accounts ____ PayPal Account ____

Website(s) ___ Domain Names: _____ iTunes ___ Twitter _____

Online Banking Account ____ Online Brokerage Account ___

Other online accounts/assets ____

____

____

****It is our recommendation that you keep a secure list of all login / passwords for above.***

Section XI - Estate Planning Documents.

Please provide me with copies of each of the following documents, if you currently have such documents in place:

*Last Will and Testament

*Revocable or Irrevocable Trusts

*Stockholder or Partnership Agreements

*Durable Powers of Attorneys

*Prenuptials or postnuptials agreements or separation agreements

*Deeds for all real property

*Life Insurance Policies

*List of tangible personal property

*Bank Statements

*Brokerage Account Statements

*Bonds/Stocks

*Corporate Books

*Partnership Agreements

*Notes Receivable

*Most recent Income Tax Return

*All prior gift tax returns, if any

*Stock Option Information