



*Real Benefits To Real People About What Really Matters*

- Please fill out this form prior to your appointment. Your information will be held in ***strictest confidence***.
- If questions do not apply, simply write in N/A. But please answer anything that does apply. We understand the form is long, but the information is necessary to give you the advice you need.

Your documents will be based on the information you provide. To that end, please read and sign the following statement. If someone helped you fill out this form or filled it out for you, please have them sign as well.

I understand that the information I am providing will form the basis of any advice I receive from the attorney. I further understand that my responses to the questionnaire are protected by the attorney-client privilege and will be held in utmost confidence. With these understandings, I affirm that the information provided herein is full, complete and accurate to the best of my present knowledge.

Dated: \_\_\_\_\_ Signed: \_\_\_\_\_

Dated: \_\_\_\_\_ Signed: \_\_\_\_\_

3023 80<sup>th</sup> Ave SE Ste 201, Mercer Island WA, 98040 | 206-232-3348

Please return to: [intake@janzagerlaw.com](mailto:intake@janzagerlaw.com)



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## Estate Planning Questionnaire: Confidential

Prepared by:

Date of Information:

Appointment date:

<b>A. PERSONAL</b>	Client 1	Client 2
1. Name	_____	_____
2. Other Names	_____	_____
3. Addresses		
a. Home	_____	_____
b. Mailing	_____	_____
4. Telephone		
a. Home	_____	_____
b. Work	_____	_____
5. Birth Date	_____	_____
6. S.S. No.	_____	_____
7. Marriage Date	_____	_____
8. Place of Marriage	_____	_____
9. Citizenship	_____	_____
10. Other	_____	_____

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**B. PRIOR MARRIAGES (If applicable)**

- 1. Former Spouse \_\_\_\_\_
- 2. Marriage Date \_\_\_\_\_
- 3. Terminated by  
Death/Divorce on \_\_\_\_\_
- 4. Obligations to or  
from former spouse \_\_\_\_\_
- 5. Child Support \_\_\_\_\_
- 6. Separate  
Maintenance \_\_\_\_\_

*In the event of divorce, please provide a copy of the Decree of Dissolution and any related Agreements.*

**C. CHILDREN (Please indicate if child of prior marriage)**

- 1. Living Children of Partner/Spouse 1:
  - a. Name \_\_\_\_\_  
Birth Date \_\_\_\_\_
  - b. Name \_\_\_\_\_  
Birth Date \_\_\_\_\_
  - c. Name \_\_\_\_\_  
Birth Date \_\_\_\_\_
  - d. Name \_\_\_\_\_  
Birth Date \_\_\_\_\_

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2. Deceased Children of Partner/Spouse 1 (Do you have any deceased children, with surviving children; if so, please list)

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3. Living Children of Partner/Spouse 2:

a. Name \_\_\_\_\_

Birth Date \_\_\_\_\_

b. Name \_\_\_\_\_

Birth Date \_\_\_\_\_

c. Name \_\_\_\_\_

Birth Date \_\_\_\_\_

d. Name \_\_\_\_\_

Birth Date \_\_\_\_\_

4. Deceased Children of Partner/Spouse 2 (Do you have any deceased children, with surviving children; if so, please list)

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## **1 D. DEPENDENTS**

Are there any persons (other than minor children) who are partially or wholly dependent upon either spouse/partner for support now or possibly in the future?

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## **2 E. INTERSPOUSAL AGREEMENTS**

1. Have you ever executed a Community Property Agreement?

2. Have you ever executed any other agreements between spouses regarding your property?

*Please furnish a copy of any agreements.*

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### **3 F. TRUSTS**

1. Does any member of your family receive income from any trust?

If yes, who created the trust? \_\_\_\_\_

2. Has either spouse/partner ever created a trust, except as part of a Will?

If yes, give details \_\_\_\_\_

3. Does any family member expect to be named a beneficiary or remainderman of a trust?

If yes, please describe \_\_\_\_\_

Please furnish copies of all instruments relating to the trusts, as well as a current list of assets and statement of income.

### **4 G. INSURANCE**

1. Are there any life insurance policies in existence on the life of either spouse?

2. If so, please provide information regarding:

a. Name of Company(ies) \_\_\_\_\_

b. Type of Insurance \_\_\_\_\_

c. Amount and Cash Surrender Value \_\_\_\_\_

d. Designated Beneficiary(ies)

\_\_\_\_\_

### **5 H. JOINT TENANCY ASSETS**

Do you own any real or personal property as joint tenants with each other or third parties?

If so, please describe \_\_\_\_\_

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## 6 I. RETIREMENT BENEFITS

Is either spouse a participant in a retirement plan? If so, please provide information regarding type of plan, current value, beneficiary designation, etc.

Plan or Account: \_\_\_\_\_  
Where held: \_\_\_\_\_  
Current Value: \_\_\_\_\_  
Beneficiary Designation: \_\_\_\_\_

Plan or Account: \_\_\_\_\_  
Where held: \_\_\_\_\_  
Current Value: \_\_\_\_\_  
Beneficiary Designation: \_\_\_\_\_

Please add additional pages for any other retirement accounts or plans.

## 7 J. GIFTS AND/OR INHERITANCES

1. Are either spouse or partner or children likely to receive any gifts or inheritances?

\_\_\_\_\_

2. Does either spouse or partner make, or intend to make regular gifts to any person? If yes, please describe

\_\_\_\_\_

## 8 K. ASSET SCHEDULE

Please indicate if any asset is separate property of either spouse or partner and approximate current value.

1. Real Property \$ \_\_\_\_\_

2. Stocks and Bonds \$ \_\_\_\_\_

3. Checking/Savings \$ \_\_\_\_\_

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- 4. Life Insurance      \$ \_\_\_\_\_
- 5. Miscellaneous Property (including furniture, furnishings, antiques, automobiles, boats, collectibles, etc.)      \$ \_\_\_\_\_
- 6. Retirement Programs \$ \_\_\_\_\_
  
- Subtotal                                      \$ \_\_\_\_\_
- Less Liabilities                              \$(\_\_\_\_\_)
- Net Worth (Approximate)      \$ \_\_\_\_\_

**9 L. PLANNING OBJECTIVES AND PRIORITIES**

Please describe any significant planning objectives or priorities you may have.

- 1.
- 2.
- 3.
- 4.

**10 CONFLICT OF INTEREST**

Because both partners may have legal rights with respect to their properties and their children, heirs, beneficiaries, etc., you should consider whether you want to retain separate attorneys to do your respective estate plans. There may be certain inherent conflicts of interest if our law office prepares the estate plan for both spouses although the majority of couples do use the same office.

We do hereby waive any conflict(s) of interest that may arise in having Jan G. Zager prepare our respective estate plans, documents, etc., and in advising us accordingly.

Date:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Print Name

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