

**RECORD OF PERSONAL AND BUSINESS
INFORMATION FOR ESTATE PLAN**

THIS DOCUMENT is a record of information concerning the personal life and business affairs of _____, hereinafter called testator, and was prepared by _____ from information supplied by testator on _____, 19 _____, in connection with preparation of the estate plan and will of testator.

A. GENERAL INFORMATION

1. NAME.

a. Full name of testator: _____

b. Names, other than the name set forth above, by which testator has been or is now known: _____

2. ADDRESS.

a. Present residence address: _____

b. Residence address other than above address: _____

c. Average length of the time spent annually at each address: _____

3. TELEPHONE NUMBERS.

a. Present residence: _____

b. Business: _____

4. SOCIAL SECURITY NUMBERS.

a. Testator: _____

b. Spouse: _____

5. BIRTH DATE.

a. Date of birth: _____

b. Place of birth: _____

c. Birth Certificate? Yes _____ No _____

d. If yes, location of birth certificate: _____

6. CITIZENSHIP.

a. Citizen of United States? Yes _____ No _____

b. If citizen of United States, _____

by birth _____ naturalized.

c. If naturalized, specify:

(1) Date of naturalization (final papers): _____

(2) Place of naturalization: _____

(3) Location of naturalization certificate: _____

d. If not citizen of United States, citizen of what
country? _____

B. FAMILY INFORMATION

1. CURRENT MARITAL STATUS.

a. Married: _____

b. Divorced or marriage dissolved or annuled: _____

c. Separated: _____

d. Widowed: _____

e. Never married: _____

2. IF MARRIED:

a. Date of marriage: _____

b. Location of marriage certificate: _____

c. Name of spouse: _____

d. Age of spouse: _____

e. Address of spouse: _____

f. Spouse previously married? Yes _____ No _____

g. If spouse was previously married, how was marriage

terminated: _____

(1) If marriage was terminated by divorce,

dissolution of marriage, or annulment, specify details, including court, date, place, property settlement agreement, etc.:

(2) If marriage was terminated by death, specify date and place of death, and status of decedent's estate, etc.:

h. Testator previously married? Yes _____ No _____

i. If testator was previously married, how was marriage

terminated: _____

(1) If marriage was terminated by divorce,

dissolution of marriage, or annulment, specify details, including court, date, place, property settlement agreement, etc.:

(2) If marriage was terminated by death, specify date and place of death, and status of decedent's

estate, etc.: _____

j. Has spouse executed a Will? Yes _____ No _____

k. If spouse has executed a Will, was Will executed

before or after marriage to testator? _____ Before _____ After

l. Location of spouse's Will: _____

m. Is testator party to any antenuptial agreement?

_____ Yes _____ No

(1) Location of agreement: _____

(2) General contents of agreement: _____

3. IF TESTATOR DIVORCED OR MARRIAGE DISSOLVED OR ANNULED:

a. Name of state and court in which decree of divorce,

dissolution, or annulment was entered: _____

b. Date of decree: _____

c. Location of testator's copy of decree: _____

d. General contents of decree with respect to support and

property rights: _____

e. Location of any property settlement agreement or

alimony or support agreement or trust: _____

f. General contents of any property settlement agreement
or alimony or support agreement or trust: _____

4. IF SEPARATED:

a. Name of state and court in which separation decree was
entered: _____

b. Date of decree: _____

c. Location of testator's copy of decree: _____

d. General contents of decree with respect to support and
property rights: _____

e. Location of any separation agreement:

f. General contents of any separation agreement with
respect to support and property rights:

5. IF WIDOWED:

a. Date and place of spouse's death: _____

b. Spouse died testate; _____ intestate _____

c. Has spouse's estate been administered? _____ Yes

_____ No

d. Name of state and court in which spouse's estate was

or is being administered: _____

e. If estate is still being administered, general status

of administration: _____

f. Testator's interest (as heir, legatee, devisee,

creditor, etc.) in spouse's estate: _____

6. NEXT OF KIN:

(Include children both out of wedlock, adopted children,
and children of deceased children)

NAME	BIRTH	ADDRESS	RELATIONSHIP
DATE			
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

C. EMPLOYMENT AND EMPLOYMENT BENEFITS

1. If Employed (including employment by closely held corporation):

a. Name of employer: _____

b. Address: _____

c. Telephone Number: _____

d. Date employed: _____

e. Location of employment agreement, if any: _____

f. General contents of employment agreement, if any:

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g. Employment benefits (specify beneficiary when appropriate):

(1) Health and accident insurance: _____

(2) Life insurance: _____

(3) Vacation: _____

(4) Pension: _____

(5) Profit sharing: _____

(6) Stock options: _____

(7) Other benefits: _____

2. IF SELF-EMPLOYED:

a. Name of business: _____

b. Address: _____

c. Telephone Number: _____

d. Nature of business: _____

e. Has testator established self employment pension plan?

_____ Yes _____ No

3. IF RETIRED:

a. Date of retirement: _____

b. Details of pension benefits other than social security

benefits: _____

_____ D. MILITARY SERVICE

1. United States Military Service? _____ Yes _____ No

If yes, branch: _____ 2. Military Service in Foreign Countries? _____ Yes _____ No

a. Country: _____

b. Branch of Service: _____

3. If discharged, location of discharge papers: _____

E. REAL PROPERTY

1. Nature of Interest: _____

Description of Property: _____ Holder(s) of Encumbrance(s): _____

Location of Deed and Title Insurance Policy: _____

2. Nature of Interest: _____

Description of Property: _____

Holder(s) of Encumbrance(s): _____

Location of Deed and Title Insurance Policy: _____

3. Nature of Interest: _____

Description of Property: _____ Holder(s) of
Encumbrance(s): _____

Location of Deed and Title Insurance Policy: _____

4. Nature of Interest: _____

Description of Property: _____ Holder(s) of
Encumbrance(s): _____

Location of Deed and Title Insurance Policy: _____

F. SAVINGS AND LOAN, CREDIT UNION ACCOUNTS

1. Firm: _____

Branch: _____

Type of Account: _____ Title of
Account: _____ Account
Number: _____ Average
Balance: _____ Location of
Passbook: _____

2. Firm: _____

Branch: _____ Type of
Account: _____ Title of Account:
_____ Account

Number: _____ Average
Balance: _____ Location of
Passbook: _____

3. Firm: _____

Branch: _____ Type of
Account: _____ Title of Account:

_____ Account
Number: _____ Average
Balance: _____ Location of
Passbook: _____

G. SAFE DEPOSIT BOXES

1. Box Number: _____

Bank or Trust Company where located: _____

Branch: _____

Box held in name of: _____ Person
entitled to enter box: _____

Location of Key: _____

2. Box Number: _____

Bank or Trust Company where located: _____

Branch: _____

Box held in name of: _____ Person
entitled to enter box: _____

Location of Key: _____

G.(a) SECURITIES

1. Type of Security: _____

Company: _____
Number of shares or principal amount: _____ Date acquired:
_____ Price paid or manner in
which acquired: _____

Location of Certificates: _____

2. Type of Security: _____

Company: _____
Number of shares or principal amount: _____ Date acquired: _____
_____ Price paid or manner in
which acquired: _____

Location of Certificates: _____

3. Type of Security: _____

Company: _____
Number of shares or principal amount: _____ Date acquired: _____
_____ Price paid or manner in
which acquired: _____

Location of Certificates: _____

H. INSURANCE

1. LIFE INSURANCE:

a. Amount: _____

Company: _____
Policy Number: _____ Location
of Property: _____

b. Amount: _____

Company: _____
Policy Number: _____ Location
of Property: _____

c. Amount: _____

Company: _____
Policy Number: _____

Location of Property: _____

2. OTHER INSURANCE:

a. Kind: _____

Amount: _____

Company: _____ Policy

Number: _____ Location of

Property: _____

b. Kind: _____

Amount: _____

Company: _____

Policy Number: _____

Location of Property: _____

c. Kind: _____

Amount: _____

Company: _____

Policy Number: _____

Location of Property: _____

I. PERSONAL PROPERTY

1. Furniture and Furnishings; Household Goods and Appliances:

_____	_____
_____	_____
_____	_____
_____	_____

2. Motor Vehicles; Boats; Aircraft:

	Make	Model	Year	Location
a.	_____	_____	_____	_____
b.	_____	_____	_____	_____
c.	_____	_____	_____	_____
d.	_____	_____	_____	_____

3. Jewelry:

a. Description: _____

b. Value: _____

c. Location: _____

4. STAMP AND COIN COLLECTION; PAINTINGS AND OTHER ART

OBJECTS:

a. Description: _____

Value: _____

Location: _____

b. Description: _____

Value: _____

Location: _____

c. Description: _____

Value: _____

Location: _____

5. MISCELLANEOUS PERSONAL PROPERTY:

a. Description: _____

Value: _____

Location: _____

b. Description: _____

Value: _____

Location: _____

c. Description: _____

Value: _____

Location: _____

J. BUSINESS INTERESTS OF TESTATOR

1. a. Name of
Business: _____

b. Nature of Business: _____

c. Form of Organization: _____

d. Net
Worth: _____

e. Testator's
Interest: _____

f. Testator's Position: _____

K. PATENTS, COPYRIGHTS, FRANCHISES, ETC.

a. Type: _____

b. Nature of Testator's Interest: _____

c. Date of Acquisition: _____

d. Value: _____

L. OBLIGATIONS OWED TO TESTATOR

1. a. Description of Debt:

Evidenced by: _____

Balance due: _____

Name of Debtor: _____

Address of Debtor: _____

b. Description of Debt: _____

Evidenced by: _____

Balance due: _____

Name of Debtor: _____

Address of Debtor: _____

c. Description of Debt: _____

Evidenced by: _____

Balance due: _____

Name of Debtor: _____

Address of Debtor: _____

M. TESTATOR'S INTEREST IN TRUSTS AND ESTATES

1. Testator Beneficiary of Trust? _____ Yes _____ No

a. Location of trust instrument: _____

b. General Contents of trust instrument: _____

2. Does Testator expect inheritance from persons other than
deceased spouse? _____ Yes _____ No

a. Estate(s) of _____

b. Name of state and court of administration: _____

c. General analysis of status and rights: _____

N. TAX RETURNS

1. Location of returns: _____

2. Location of supporting documents: _____

3. Returns prepared by: (name and address) _____

O. PENDING LITIGATION

1. Testator, Plaintiff or Defendant? _____

2. State and Court: _____

3. Nature of dispute: _____

4. Amount in controversy: _____

5. Current status of litigation: _____

6. Testator represented by: _____

P. OBLIGATIONS OWED BY TESTATOR

1. Nature of obligation: _____

Evidenced by: _____

Creditor: _____

Address: _____

Amount: _____

2. Nature of obligation: _____

Evidenced by: _____

Creditor: _____

Address: _____

Amount: _____

3. Nature of obligation: _____

Evidenced by: _____

Creditor: _____

Address: _____

Amount: _____

Q. INTERVIVOS TRUST ESTABLISHED BY TESTATOR

1. Beneficiaries: _____

Revocable or irrevocable? _____ Date
established: _____ Location of trust
instrument: _____

2. Beneficiaries: _____

Revocable or irrevocable? _____ Date
established: _____ Location of trust
instrument: _____

3. Beneficiaries: _____

Revocable or irrevocable? _____ Date
established: _____ Location of trust
instrument: _____

R. GIFTS, TRANSFERS, AND ADVANCEMENTS MADE BY TESTATOR

1. Donee: _____
Type of gift: _____ Value: _____
_____ Date: _____

2. Donee: _____
Type of gift: _____ Value: _____
_____ Date: _____

3. Donee: _____

Type of gift: _____ Value:

_____ Date:

4. Gift tax returns filed: _____ Yes _____ No

5. If yes, prepared by: _____

S. FIDUCIARY DUTIES AND POWERS OF APPOINTMENT OF TESTATOR

1. FIDUCIARY CAPACITIES OF TRUSTEE: _____

a. Manner of creation: _____

b. Location of instrument under which fiduciary

capacities created: _____

c. General description of status: _____

2. POWERS OF APPOINTMENT:

a. Instrument under which power created: _____

b. Location of instrument: _____

c. General contents of instrument: _____

T. WILLS AND CODICILS

1. Will executed by Testator? _____ Yes _____ No

2. Date Will executed: _____

3. Place Will executed: _____

4. Location of Will (address): _____

5. Attorney who prepared Will (address): _____

6. Executor under Will (name): _____

7. Trustee(s) under Will, if any (names and addresses): _____

8. Guardian, if any, for minor children (name and address):

9. Codicils executed by Testator? _____ Yes _____ No

10. Dates Codicils executed: _____

11. Places Codicils executed: _____

12. Location of Codicils: _____

13. Changed circumstances (such as marriage, divorce, death, adoption or birth of children, conveyance or mortgage of devised assets, etc.) that could affect provisions of Will

or Codicil: _____
