

**SWEET & MAIER, S.C.**  
**PERSONAL INFORMATION**

*[Note: Will be kept confidential]*

**BACKGROUND INFORMATION:**

	<b>YOU</b>	<b>YOUR SPOUSE</b>
First Name	_____	_____
Middle Name	_____	_____
Last Name	_____	_____
Street Address	_____	_____
City, County, State	_____	_____
Email	_____	_____
Home Phone #	_____	_____
Cell Phone #	_____	_____
Date of Birth	_____	_____
Social Security #	_____	_____
Citizenship	_____	_____
Name of Employer	_____	_____
Work Phone #	_____	_____
Occupation	_____	_____

**CURRENT ESTATE PLAN:**

Do you now have a Will, and other estate planning documents? Check one: Yes \_\_\_\_ No \_\_\_\_

If yes, ***bring copies to your appointment***, and please check which documents you have now:

Will \_\_\_\_ Living Will \_\_\_\_ Power of Attorney for Health Care \_\_\_\_ Power of Attorney for

Finances \_\_\_\_ Trust Agreement \_\_\_\_ Marital Property Agreement \_\_\_\_ Other (please specify):

\_\_\_\_\_

**CHILDREN\***

Name: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Married: \_\_\_\_\_ Grandchildren: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Name: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Married: \_\_\_\_\_ Grandchildren: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Name: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Married: \_\_\_\_\_ Grandchildren: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Name: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Married: \_\_\_\_\_ Grandchildren: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Are any children not also children of current spouse? If so, please identify: \_\_\_\_\_

\_\_\_\_\_

Are there any children not listed above, who have died? Yes \_\_\_ No \_\_\_

If so, please identify: \_\_\_\_\_

Are there any adopted children? Yes \_\_\_ No \_\_\_ If so, who: \_\_\_\_\_

Do any of your children or grandchildren require special needs? Yes \_\_\_ No \_\_\_

**\*[Note, please feel free to attach extra sheets if needed to provide further information.]**

## **THINGS TO THINK ABOUT BEFORE YOUR APPOINTMENT:**

### **BENEFICIARIES:**

If you choose your children and one predeceases you do you want their share to go to their children (step/adopted children)?

If your family dies in a common catastrophe or your children predecease you who do you want to inherit?

### **PERSONAL REPRESENTATIVES:** (The person you name to carry out your wishes)

Please bring or send: Names, Addresses, Phone Numbers (You should have a few in mind in case the first individual you name predeceases you)

**TRUSTEE:** (If you have a Trust, the person you name to carry out and manage the assets held by your Trust, when you can no longer do so, or upon your death)

Please bring or send: Names, Addresses, Phone Numbers (You should have a few in mind in case the first individual you name predeceases you)

**GUARDIAN:** (The person and or couple who will raise your minor children)

Please bring or send: Names, Addresses (You should have a few in mind in case the first individual you name predeceases you)

If you name a couple and upon your death only one of them has survived you, do you want that person to be the guardian as an individual?

### **POWERS OF ATTORNEY/AGENTS:**

**Financial:** If you choose to have a financial power of attorney you will need to indicate who you are giving the power to. Spouses do not have to use the same agents. You can name separate individuals to act for you as an agent in financial and health care/medical matters. Make sure you are comfortable with the person you name managing your assets when you are no longer capable. Please bring with you names, addresses and phone numbers of the individuals and any alternates.

**Medical:** If you choose to have a medical power of attorney you will need to name an agent who will carry out your wishes. Spouses do not have to use the same agents. Make sure you are comfortable with the person and that they are also comfortable in making the necessary decisions. Bring with you names, addresses and phone numbers of the individuals and at least one alternate.

**FINANCIAL INFORMATION**

*We do not need specific figures or account numbers, so do not be overly concerned. This information is very helpful to us in order to evaluate potential tax consequences, and to determine the best estate plan for you. It is also a means for us to identify which properties you may own that are titled in a way [such as life insurance and 401(k) plans] which will pass to beneficiaries outside of your Will.*

ASSET*	HOW TITLED	VALUE (less debt)
Home	_____	_____
Other Real Estate	_____	_____
Securities	_____	_____
Bank Accounts/ Certificates, etc.	_____	_____
Collectibles/ Antiques	_____	_____
Personal Property (Auto, Boat, Motorcycle, etc.)	_____	_____
Other	_____	_____

Do you have any Life Insurance? If so, who owns the policy and who is the beneficiary? \_\_\_\_\_  
\_\_\_\_\_

Do you have a retirement fund or 401(k) or 401(b) plan? If so who is the beneficiary and what is the approximate value? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you anticipate any future substantial gifts or inheritance? YES \_\_\_\_ or NO \_\_\_\_

Are there any other questions or special circumstances you would like to discuss? If so, please note in brief: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**\*Note: Feel free to attach additional sheets as may be helpful or necessary. Do NOT be concerned about being comprehensive about this requested information. We will discuss in full when we meet about your estate plan. This information is to provide us with basic information.**