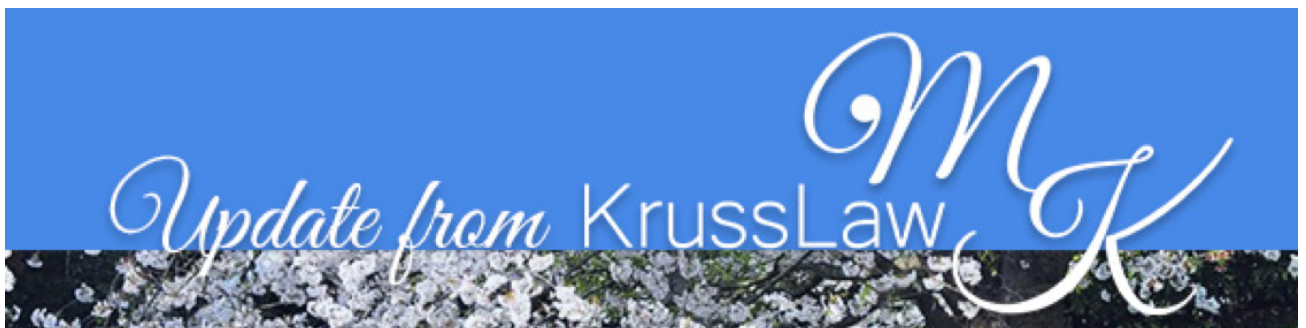


# Estate Planning Client Information Summary

## Confidential

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# SIMPLE BACKGROUND INFORMATION

The information you provide in this section provides us with important objective information about you, your age, marital status, where you live, and how best to communicate with you.

## Spouse 1/ Partner 1 Information

Full Legal Name \_\_\_\_\_  
(Name most often used to title property and accounts)

Also Known As \_\_\_\_\_  
(Other names used to title property and accounts)

Prefer to be called \_\_\_\_\_ Preferred Pronouns \_\_\_\_\_

Birth date \_\_\_\_\_ SS# \_\_\_\_\_ US Citizen? \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Telephone \_\_\_\_\_ County of Residence \_\_\_\_\_

Business Telephone \_\_\_\_\_

Employer \_\_\_\_\_ Position \_\_\_\_\_

E-mail Address \_\_\_\_\_  It is okay to communicate with me via my E-mail address

## Spouse 2/ Partner 2 Information

Full Legal Name \_\_\_\_\_  
(Name most often used to title property and accounts)

Also Known As \_\_\_\_\_  
(Other names used to title property and accounts)

Prefer to be called \_\_\_\_\_ Preferred Pronouns \_\_\_\_\_

Birth date \_\_\_\_\_ SS# \_\_\_\_\_ US Citizen? \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Telephone \_\_\_\_\_ County of Residence \_\_\_\_\_

Business Telephone \_\_\_\_\_

Employer \_\_\_\_\_ Position \_\_\_\_\_

E-mail Address \_\_\_\_\_  It is okay to communicate with me via my E-mail address

Date of Marriage \_\_\_\_\_ Existing Prenuptial Agreement? \_\_\_\_\_

Have you ever lived in any of the following states: Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas, Washington, or Wisconsin? Yes No

Are either of your parents still living? Yes No

## POTENTIAL “INDIVIDUAL” BENEFICIARIES

Identify those children and/or other family members who are most likely a possible beneficiary of your estate. Please use full legal names. Note: Listing a person in this section is not a firm indication of your decision to provide for a particular individual. Rather, it is simply a means of identifying individuals for discussion purposes. (Insert additional sheets, if necessary)

**Special Note When Identifying Children:** For “Children” use “JT” if both spouses are the parents, “H” if husband is the parent, “W” if wife is the parent, “S” if a single parent.

Name/Address/Telephone Number	Birth date	Relationship
1 _____ _____	_____	_____
2 _____ _____	_____	_____
3 _____ _____	_____	_____
4 _____ _____	_____	_____
5 _____ _____	_____	_____

Does any potential beneficiary have special educational, medical or physical needs, or receive governmental benefits?  
Yes No

Does any potential beneficiary have any potential problems with drug or alcohol abuse? Yes No

Are you concerned with any potential beneficiary's ability to handle/manage money? Yes No

Are you concerned with your children's ability to get along with one another? Yes No

Are their problems/concerns relative to your relationship with your children (or spouse's children)? Yes No

Have any of your children suffered a divorce? Yes No

**STEP****3****POTENTIAL “CHARITABLE” BENEFICIARIES**

Many, but not all, of our clients desire to direct a portion of their estate toward charities or other non-profit organizations. Whether it is your church, college, social club, favorite philanthropy, you may have the same desires. Take a moment and contemplate whether you would ever include such a bequest within your legacy plan. Note: Listing a particular organization in this section is not a firm indication of your decision to make a bequest. Rather, it is simply a means of identifying charity or non-profit for discussion purposes.

**Name of Charity or Non-Profit****Address**

1 \_\_\_\_\_

\_\_\_\_\_

2 \_\_\_\_\_

\_\_\_\_\_

3 \_\_\_\_\_

\_\_\_\_\_

4 \_\_\_\_\_

\_\_\_\_\_

**STEP****4****PEOPLE WHO ADVISE YOU**

Your various advisors play a key role in the establishment of your estate plan. By way of example, your financial advisor and life insurance agent may need to be contacted to confirm and/or change beneficiary designations and titling of accounts. Your accountant may need to be consulted relative to income tax matters. And your physician should be informed of any health care directives you establish.

**Name****Telephone**

Accountant \_\_\_\_\_

\_\_\_\_\_

Financial Advisor \_\_\_\_\_

\_\_\_\_\_

Life Insurance Agent \_\_\_\_\_

\_\_\_\_\_

Personal Physician (H) \_\_\_\_\_

\_\_\_\_\_

Personal Physician (W) \_\_\_\_\_

\_\_\_\_\_

Emergency Contact \_\_\_\_\_

\_\_\_\_\_

# CONCERNS & ANXIETIES

Our objective is to assist clients in identifying their concerns and anxieties. All too often in the planning process, a client will discover that there are other, more pressing concerns than the one that caused them to begin the planning process. Please review the following risks that we frequently hear from clients, identify those risks of which you are concerned, and provide us with some sense about how concerned you are with that particular risk. This information will assist us in focusing our conversations toward the issues that are the most pressing to you.

**Level of Concern (if any)**

**None                      Low                      Medium                      High**

**Tax Concerns**

Risk of the IRS/Oregon “inheriting” some of my estate when we die. ....

Risk of capital gains taxes paid on the sale of property.....

**Family Concerns**

Risk of persons other than those we select will gain custody of any minor children.

Risk of a child or other beneficiary losing his or her inheritance to creditors, lawsuits or to a divorcing spouse.....

Risk of a child or other beneficiary losing his or her inheritance due to mismanagement of the money .....

Risk that upon the death of a child or other beneficiary, any inheritance received by that person might pass to a spouse (who may later remarry) rather than passing to a grandchild or other preferred heir .....

Risk that an inheritance passing to a minor child or grandchild might be squandered or stolen by the person in charge of managing the money for that grandchild .....

Risk that an inheritance received by a child or other beneficiary who has a disability would render them ineligible for governmental benefits.....

Risk that assets left to your spouse (whether by virtue of joint tenancy or by will) might not pass to your intended heirs as a result of your spouse remarrying .....

Risk of unnecessary litigation from heirs who receive less than they think they are entitled to .....

Risk of estate passing unequally due to nature of assets owned, such as where a business comprises most of the value of the estate .....

Risk that heirs will not fully appreciate the values and virtues used to create the inheritance .....

Risk that parents, who may need financial assistance, are not provided for.....

## APPOINTMENTS—PEOPLE TO ASSIST YOU

One of the most important aspects of any estate plan is the “appointment” of various persons to assist you and your family in times of need – particularly when death or disability strikes. These appointed “helpers” are called by different names depending on the type of estate plan you elect to implement. In this Section, we try to avoid labels. Instead, we focus on the roles these helpers play in protecting your family and your estate.

**Successors to You and Your Spouse. Please provide full legal names, relationship to you (or state if it is a friend) and address and phone numbers. The people you name are contingent to your Spouse/Partner.**

### FRONT WHEEL

**Personal Representative (aka Executor).** This person will collect your assets, pay your bills, and make distributions to the beneficiaries of your estate. List the persons in the order in which they should serve, their relationship to you, addresses and telephone numbers.

1. \_\_\_\_\_
2. \_\_\_\_\_

**Guardians.** This person will take care of your minor children. The *primary* guardian, by *default*, is almost always the children's other parent. The person(s) you name as guardians below would be the backups in the event you both died. List in the order in which these guardians should serve, their names, their relationship to you, addresses and telephone numbers.

1. \_\_\_\_\_
2. \_\_\_\_\_

**Temporary Guardians.** This person will take care of your minor children so they can complete high school or until your permanent/primary Guardian's can come collect them. List in the order in which these guardians should serve, their names, their relationship to you, addresses and telephone numbers.

1. \_\_\_\_\_
2. \_\_\_\_\_

**Individuals your would like to sit on the Guardianship Panel.** Provide the person's address, phone number, and relationship to you.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

**Trustees.** This person will manage your assets and make distributions to the beneficiaries of any trusts you establish (**e.g., you, minor children, or adults who need creditor protection or have disabilities**). List the names of those persons who should serve as trustees once you are deceased or incapacitated, their relationship to you, address & phone number

1. \_\_\_\_\_
2. \_\_\_\_\_

### **BACK WHEEL**

**Financial Agent.** List the person who should manage and access your non-trust assets via a Power of Attorney in the event you become incapacitated. Provide the person's address, phone number, and relationship to you.

1. \_\_\_\_\_
2. \_\_\_\_\_

**Medical Agent.** List the person who should make decisions concerning your medical care in the event you become incapacitated. Provide the person's address, phone number, and relationship to you.

1. \_\_\_\_\_
2. \_\_\_\_\_

### **Personal Representative**

Also called an Executor/Executrix or Administrator in some jurisdictions.

Your Personal Representative will be responsible for the following:

- Locating and protecting your assets that will be subject to probate.
- Obtaining the date of death values for all of your probate assets, including appraisals of real estate and business interests.
- If your estate is taxable, obtaining the date of death values for any non probate assets, including appraisals of real estate and business interests.
- Determining whom you owed money to and then paying off these debts.
- Assessing your income and estate tax liabilities.
- Preparing and filing all required income and estate tax returns.
- Paying the ongoing expenses of administering your estate until it can be closed, etc.



## **Guardian**

As a parent, your Will provides you the opportunity to designate a guardian for minor children in the event of your death. Naming a guardian in your Will ensures that you choose who would care for your children, not the courts.

In most cases, if your child's other parent survives you, they assume guardianship without any other special actions. However, it is important to designate a guardian in the event that neither parent is available to assume the role.

A guardian becomes responsible for the child's physical care, health, education, and welfare. This includes providing the basic needs such as food, clothing, shelter, health care decisions and education choices. The guardian is not responsible to meet the child's financial needs with his or her own money. Usually, a trustee, who may also be the personal representative, handles those arrangements with money provided by the estate and dedicated for that purpose. A guardian is not paid for his or her services.

The person you choose as the guardian should have good parenting skills and values similar to your own. You should have complete confidence in the person you nominate, and you should be certain that your nominee is willing to accept the responsibility of raising your children should the need actually arise. Family members or trusted friends are good options.

## **Trustee**

A trustee's purpose is to invest trust assets and distribute trust income or principal to beneficiaries as directed in the trust document.

A trustee's most important duty is to implement the Trust's instructions concerning how the trust property should be used to aid the beneficiaries. Whereas guardians decide how to take care of a beneficiary's physical needs, the trustee decides how to use trust assets to pay for those needs.

Among other responsibilities, a trustee has the following responsibilities:

- Making an inventory of trust assets;
- Protecting trust assets and making sure they are properly invested;
- Preparing an accounting for beneficiaries;
- Implementing the Trust's instructions as to how trust assets are to be distributed to the beneficiaries or otherwise used for their benefit.

The trustee need not make these decisions alone. The trust authorizes the trustee to obtain whatever professional services are necessary to carry out the trust's instructions. Such professionals may include investment advisors, attorneys, insurance agents or certified public accountants.

## **Agent for DPOA:**

The Durable Power of Attorney (DPOA) for Finances allows a trusted person to spend money on your behalf and manage your property if you are incapacitated.

In taking care of business under a DPOA for Finances, your Agent is supposed to do what is in your best interest and use your money and property only for your benefit. By giving someone a DPOA for Finances, you are giving that person some or all of the following powers:

- To spend your money, cash checks and withdraw money from your bank accounts.
- To sell your property, including real estate and personal property.
- To enter into contracts on your behalf.

One of the few powers not granted is the power to write your Last Will and Testament. Only you personally can write your own Will. The Agent is also not authorized to make gifts to himself or to others unless the DPOA for Finances

explicitly authorizes such gifts.

Also, your Agent will not have any authority with respect to your property when you die. (At that point the “Personal Representative” or “Executor” named in your Will or appointed by the Court will take control of your assets and their distribution.)

An advantage of the DPOA for Finances is that in signing it you do not lose any of your power to make your own decisions as long as you remain competent. Rather, you are simply sharing your power over your finances with someone else.

Another advantage of using the DPOA for Finances is that you can change your mind. You are entitled to revoke the power you gave to your relative or friend at any time as long as you are still of sound mind.

### **Health Care Representative:**

An Advance Directive appoints someone who is at least 18 years old to make medical decisions on your behalf. The health care representative and an alternate must sign the document, accepting their appointment. The patient should appoint a health care representative that he or she trusts completely. A patient can voluntarily revoke his or her appointment of a health care representative at any time.

# ASSET ASSESSMENT

Determining the ownership, value and character of your assets is important to your estate and legacy plan. The title “ownership” is important for tax and transfer matters. The “value” will be significant in determining potential tax liability. The “character” is relevant in assessing the manner by which the asset can transfer.

## Assets Information

The values listed are for discussion purposes only. A more accurate list will be obtained at a later date. You may use the back of this paper to continue a list in each category of asset.

To identify the Owner of an asset, use “JTS” for joint ownership with spouse; “JTO” for joint ownership with non-spouse; “H/P1” for Husband/Partner1 as sole owner; “W/P2” for Wife/Partner2 as sole owner; or “T” if owned by a revocable trust that you have created.

**Bank and Savings Accounts.** To identify type of account, use “CA” for checking account; “SA” for savings account; “CD” for certificate of deposit; “MM” for money market account. *Do not include IRAs or 401(k)s here.*

Financial Institution	Owner	Market Value	Type of Account
1.			
2.			
3.			
4.			
5.			

**Stocks, Bonds or Investment Accounts.** List any and all stocks and bonds you own. If held in a brokerage account, lump them together under each account. *Do not include IRAs or 401(k)s.*

Stock, Bond or Investment Acct	Owner	Market Value	Type of Plan
1.			
2.			
3.			
4.			
5.			

**Retirement Accounts.** To identify type of account, use “P” for pension; “PS” for profit sharing; IRA, Roth IRA, SEP, or 401(k).

Custodial Institution	Owner	Market Value	Type of Plan
1.			
2.			
3.			
4.			
5.			

**Real Estate.**

	Owner	Market Value	Debt
1. Personal Residence			
2.			
3.			
4.			
5.			

**Personal Property.**

Description	Owner	Market Value	Debt
1.			
2.			
3.			
4.			
5.			

**Life Insurance Policies and Annuities.** List the issuing company. To identify type of contract, use “T” for term insurance, “CV” for insurance policies having a cash value, “A” for annuities.

Insurance Company	Type	Owner	Insured	Cash Value	Death Benefit
1.					
2.					
3.					
4.					
5.					

**Other Property.** List other property that you have that does not fit into any other listed category. This may include an interest in a closely-held business, monies owed to you, etc.

Description	Owner	Market Value
1.		
2.		
3.		
4.		
5.		

### Additional Documentation

**General Document Request.** In some instances, it is necessary for us to review other documents before we can make planning recommendations. If possible, please bring with you to the Initial Interview the following documentation:

Copies of existing planning documents, including wills, trusts, powers of attorney, health care proxy, living wills, etc.

Copies of all deeds to real estate owned by you.

Copies of the most recent statements evidencing your ownership of bank accounts, investment accounts, retirement accounts, and annuities.

Prenuptial Agreement (if applicable).

Long-term care policies (if any).

Divorce Decree or Property Settlement Agreement for divorce under which continued obligations exist.

# ABOUT YOUR GOALS & OBJECTIVES

Before we meet, it is important to us to better understand what prompted you to schedule this appointment? Don't focus of the tools to be used but rather on the outcomes to be achieved.

## About Your Goals & Objectives

<u>Goals</u>	<u>Consequence if Goal Isn't Accomplished</u>
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.

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Prenuptial Agreement (if applicable).

Divorce Decree or Property Settlement Agreement for divorce under which continued obligations exist.

By whom were you referred to this office? \_\_\_\_\_

### Certification

The undersigned hereby represents to Kruslaw P.C., and each of its attorneys, that the information contained in this intake form is accurate and complete and that the undersigned understands that the law firm and its individual lawyers will rely on this information in giving me advice. I understand that if the information is inaccurate or incomplete, the recommendations made by the law firm may not be appropriate.

Signed \_\_\_\_\_