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Client Questionnaire – Estate Planning

Please fill out this form as completely as possible. If you don't know the answer to any question, leave it blank.

A. About You

Your Full Name: _____
Maiden name (if applicable) _____
Birthdate: _____
Birthplace: _____
Wedding date: _____
Wedding place: _____
Was this your first marriage? ____
--Number of previous marriages: ____
Social Security Number: _____
How long have you lived in Utah? _____
Are you a US Citizen? _____

B. About Your Spouse

Spouse's name: _____
Maiden name (if applicable) _____
Birthdate: _____
Birthplace: _____
Was this your spouse's first marriage? ____
--Number of previous marriages: ____
Social Security Number: _____
How long has your spouse lived in Utah? _____
Is your spouse a U.S. Citizen? _____

C. Family

1. In the following table, please list all of yours and your spouse's **children** (whether living or not), in order of age:

Name of Child	Birthdate	City of Residence	Mother	Father

2. If you have fewer than two living children, please list your **grandchildren**:

Name of Child	Year of Birth	City of Residence	Descended from which of your children?

3. If you have fewer than two children and fewer than two grandchildren, please list your **parents** (if living) and any living **siblings** of yours:

Name	City of Residence	Relationship to You

4. Do you have any **other dependents** not listed above?

Name	Year of Birth	City of Residence	Relationship to You

D. Financial Information

1. Real Estate

Address	Titled in Whose Name?	Purchase Price	Current Value	Mortgage	Equity

2. **Other Titled Property** (car, boat, camper, motorhome, jet skis, snowmobile, motorcycle, etc.)

Description	Titled in Whose Name?	Current Value	Outstanding Loan	Equity

3. **Checking/Savings Accounts, Interest Bearing Accounts, or CDs**

Name of Institution	Type of Account (checking, savings, CD)	Account Number	Titled in Whose Name?	Approx. Balance

4. **Safe Deposit Box**

Name of Institution	Location	Box Number	Titled in Whose Name?

5. **Stock Brokerage Accounts, Mutual Funds, Dividend Reinvestment Accounts** (401k's, IRA's, and annuities will be listed later—do not list them here.)

Name of Institution/Broker	Address	Account Number	Titled in Whose Name?	Approx. Balance

6. Individually-held **Stock or Bond Certificates**

# of Shares	Name of Stock	CUSIP Numbers	Titled in Whose Name?	Name/Address of Transfer Agent	Current Value

7. **Retirement-Type Plans** (Profit sharing, IRA's, 401k's, thrift-savings, annuities)

Name/Address of Institution	Type of Plan	Account Number	Owner	Beneficiary	Current Value

8. **Businesses or partnership interests**

Name of Company	Type of Ownership/Titled in Whose Name?	Number of Shares	Purchase Price	Current Value

9. **Life Insurance**

Name of Company	Address	Policy Number	Insured/Owner	Cash Value	Death Benefit

10. **Special Items of Value** (collections, antiques, jewelry, art, etc.)

Description of Item	Approx. Value

11. **Money Other People Owe to You** (Please list any debt over \$500.00, and provide us with a copy of the written note.)

Name of Debtor	Description of Debt	If Secured, Describe Collateral (including location)	Balance Due

12. What is the approximate total value of all of your **remaining personal property** that has not been included above? (Estimate is fine).

13. **Debts** (other than mortgages listed in Section 1 or loans mentioned in Section 2)

Description of Debt	Amount Owed

14. **Total Value of All Assets** (Sections 1 through 12)

15. **Outstanding Debt** (Sum of all lines in Section 13)

16. **NET ESTATE**

E. Fiduciaries

1. **Executor.** Whom would you like to be your executor? List your first and second choices.

- 1. _____
- 2. _____

2. **Trustee** – In the event that a trust is needed as part of your estate plan, whom would you appoint as trustee or co-trustee? (Your executor may also serve as your trustee.)

a. *Trustee(s)* – manages your trust now; usually you and your spouse.

- 1. _____
- 2. _____

b. *Successor Trustee(s)* – Steps in *at your incapacity or death*. May be an adult child or a trusted friend.

- 1. _____
- 2. _____
- 3. _____

c. You can also appoint a *trust committee* to govern the actions of the trustee by majority vote. If you would like to appoint a trust committee, please list their names below (you may have as many members of the committee as you wish, but it should be an odd number). This is completely optional—you do not need to appoint a trust committee.

- 1. _____
- 2. _____
- 3. _____

3. **Guardian for Minor Children.** Generally the surviving spouse is designated as the guardian of any minor children. Upon the death of the surviving parent, or if both parents were to die at the same time, whom would you designate as the guardian(s) of your minor children?

- 1. _____
- 2. _____

F. Beneficiaries

1. **Beneficiaries and Shares.** Who should receive your estate, and in what proportions? (You do not, at this time, need to specify which specific heirlooms should go to which individuals).

2. **Distribution.** Do you want your beneficiaries to receive their inheritance in installments, at certain ages, or all at once?

3. **Beneficiaries Needing Special Care.** Do any of your dependents (aging parents, disabled child) require special care? Are they currently receiving government benefits?

4. **Disinheriting.** Are there any relatives that you specifically do not want to receive anything from your estate?

5. **Alternate Beneficiary.** If all of your beneficiaries predecease you, who should receive your estate?
