

RHODES LAW FIRM, PLLC

ESTATE PLANNING - INITIAL CLIENT FORM

APPOINTMENT DATE: _____

PERSONAL INFORMATION

SIGNATURE NAME OF CLIENT: _____
(Name most often used to title property and accounts)

ALSO KNOWN AS: _____
(Other names used to title property and accounts)

PREFER TO BE CALLED: _____ U.S. CITIZEN? Y/N BIRTH DATE ___/___/___

ADDRESS: _____
Street #/P.O. Street Name City County State Zip

SOCIAL SECURITY #: _____ DRIVER'S LICENSE #: _____

OCCUPATION: _____ EMPLOYER: _____

EMAIL ADDRESS: _____ It is okay to communicate with me via email.

HOME PHONE: _____ WORK PHONE: _____

MOBILE PHONE: _____

MARRIED DIVORCED WIDOWED SINGLE
(DATE OF MARRIAGE: _____)

PERSONAL INFORMATION - SPOUSE

SPOUSE'S SIGNATURE 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: _____ U.S. CITIZEN? Y/N BIRTH DATE ___/___/___

SOCIAL SECURITY #: _____ DRIVER'S LICENSE #: _____

OCCUPATION: _____ EMPLOYER: _____

EMAIL ADDRESS: _____ It is okay to communicate with me via email.

WORK PHONE: _____ MOBILE PHONE: _____

PERSONAL INFORMATION - CHILDREN

For step-parents, under “Parent” note “H” if only husband is biological/adoptive parent, note “W” if only wife is biological/adoptive parent.

LEGAL NAME

BIRTH DATE

PARENT

PLANNING OBJECTIVES

What are your primary objectives in updating or creating a new estate plan? *(Check all that apply.)*

- Minimizing taxes during your life (income taxes, capital gains taxes, estate taxes on inheritances you expect to receive)
- Minimizing or eliminating estate taxes upon your death
- Reducing estate administration costs/delays through probate avoidance
- Avoid or limit Medicaid claims on your assets should you require long-term care
- Giving a special needs beneficiary assets that are protected from government seizure while retaining eligibility for needed services
- Choosing who will receive your assets upon your death
- Protecting you or your spouse from malpractice or other creditor claims
- Choosing who will make financial decisions for you if you become incapacitated
- Choosing who will make healthcare decisions for you if you become incapacitated
- Specifying your wishes/instructions regarding life sustaining procedures if you become incapacitated and are near death, are terminally ill, in a permanent coma or have dementia
- Protecting your children or other beneficiaries from spending their inheritance too quickly
- Protecting your children’s inheritance from an over-reaching ex-spouse or other relative
- Protecting your estate from litigation claims by disinherited heirs
- Selecting a guardian for your minor children.
- To benefit a charitable organization or activity
- To support a common family goal through coordinated planning
- To provide for the orderly continuation and transfer of a family business

IMPORTANT FAMILY QUESTIONS

		<u>HUSBAND</u>		<u>WIFE</u>	
1.	Do you have a will, trust, or other estate planning documents? <i>Please furnish copies of these documents.</i>	YES	NO	YES	NO
2.	Are you making payments pursuant to a divorce or property settlement order? <i>Please furnish a copy.</i>	YES	NO	YES	NO
3.	If married, have you and your spouse signed a pre- or post-marriage contract? <i>Please furnish a copy.</i>	YES	NO	YES	NO
4.	Do you or any of your children or other beneficiaries have disabilities, serious health problems, or other special needs? <i>If yes, please describe below.</i>	YES	NO	YES	NO
5.	Do you own a business?	YES	NO	YES	NO
6.	Do you own a long-term care (nursing home) insurance policy?	YES	NO	YES	NO
7.	Do you own any property that is not also owned by your spouse? <i>Please describe below.</i>	YES	NO	YES	NO
8.	Have you (or your spouse) ever filed federal or state gift tax returns? <i>Please furnish copies of these returns.</i>	YES	NO	YES	NO
9.	Do you support any charitable organizations now that you wish to make provisions for at the time of your death? <i>If so, please explain below.</i>	YES	NO	YES	NO
10.	Are you (or your spouse) currently the beneficiary of anyone else's trust? <i>If so, please explain below.</i>	YES	NO	YES	NO

ADDITIONAL INFORMATION FROM ABOVE: