



# Questionnaire

## *Estate Analysis of Married Couple*

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\*\*\*\* *Confidential* \*\*\*\*

### Family Information

#### A. Husband and Wife

1. Husband's full name \_\_\_\_\_
2. Wife's full name \_\_\_\_\_
3. Home address \_\_\_\_\_  
\_\_\_\_\_
4. Home phone \_\_\_\_\_
5. Husband's mobile phone \_\_\_\_\_
6. Wife's mobile phone \_\_\_\_\_
7. Husband's personal e-mail address \_\_\_\_\_
8. Wife's personal e-mail address \_\_\_\_\_
9. Husband's date of birth \_\_\_\_\_
10. Wife's date of birth \_\_\_\_\_
11. Husband's Social Security Number \_\_\_\_\_
12. Wife's Social Security Number \_\_\_\_\_
13. Husband's occupation/employer \_\_\_\_\_  
Business address \_\_\_\_\_  
\_\_\_\_\_  
Business phone \_\_\_\_\_  
Husband's business e-mail address \_\_\_\_\_
14. Wife's occupation/employer \_\_\_\_\_  
Business address \_\_\_\_\_  
\_\_\_\_\_  
Business phone \_\_\_\_\_  
Wife's business e-mail address \_\_\_\_\_
15. Is Husband a U.S. citizen?  Yes  No  
If no, country(ies) of citizenship \_\_\_\_\_
16. Is Wife a U.S. citizen?  Yes  No  
If no, country(ies) of citizenship \_\_\_\_\_

B. Immediate Family

*Children<sup>1</sup>*

Full Name	Date of Birth	Marital Status
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

*Grandchildren*

Full Name	Date of Birth	Marital Status	Parent's Name
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

C. Marital History

1. Date and place of marriage \_\_\_\_\_
2. List the states where you have lived since your marriage and the dates you lived in each state  
\_\_\_\_\_
3. Has either of you been previously married?  Yes  No  
If yes, did the marriage end because of:  
 Death; please give name of deceased spouse, the date and place of his or her death  
\_\_\_\_\_  
 Divorce; please give name of divorced spouse, the date and place of divorce  
\_\_\_\_\_

D. Parents And Other Family Members

	Husband		Wife	
	<i>Father</i>	<i>Mother</i>	<i>Father</i>	<i>Mother</i>
1. Are your parents living?	_____	_____	_____	_____
2. What are their ages?	_____	_____	_____	_____
3. In what state do they live?	_____	_____	_____	_____
4. Do they have wills?	_____	_____	_____	_____
5. What is the approximate inheritance you might receive?	_____	_____	_____	_____
6. Is there any other information about you or your spouse's families that is relevant to your estate plan?	_____			
7. Do either of you or your children expect a substantial inheritance from anyone other than your parents?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, describe	_____			

<sup>1</sup> Indicate if any are children from a previous marriage of Husband or Wife.

E. Personal Information

1. Is either spouse receiving social security, disability, or other governmental benefits?

Yes  No

If yes, describe \_\_\_\_\_

2. Is either spouse now or have you ever been in the military or married to a person who was or is in the military?

Yes  No

If yes, describe \_\_\_\_\_

3. Is either spouse making payments pursuant to a divorce or property settlement order?

Yes  No

If yes, please send a copy with this Questionnaire.

4. Have you signed a pre- or post-marriage contract?

Yes  No

If yes, please send a copy with this Questionnaire.

5. Is either spouse a signatory on a foreign bank account?

Yes  No

If yes, describe \_\_\_\_\_

6. Is either spouse named as an agent under someone else's power of attorney (either medical or financial)?

Yes  No

If yes, describe \_\_\_\_\_

7. Is either spouse a party to any judicial proceedings or lawsuits?

Yes  No

If yes, describe \_\_\_\_\_

F. Previous Estate Planning Instruments

1. Do you presently have a will?

Husband:  Yes  No

Wife:  Yes  No

If yes, please send a copy of the will and any codicils with this Questionnaire.

2. Have you ever established a trust?

Husband:  Yes  No

Wife:  Yes  No

If yes, please send a copy of the trust agreement and any amendments with this Questionnaire.

3. Are you or any of the members of your immediate family beneficiaries of any estates or trusts?

Husband:  Yes  No

Wife:  Yes  No

If yes, please send copies with this Questionnaire.

4. Are you or any of the members of your immediate family a trustee now (or are you or they likely to be a trustee in the future) of a trust?

Husband:  Yes  No

Wife:  Yes  No

If yes, please send a copy with this Questionnaire.

5. Are you or any of the members of your immediate family an executor of an estate?

Husband:  Yes  No

Wife:  Yes  No

If yes, describe \_\_\_\_\_

G. Miscellaneous Data

1. Name of Accountant \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_  
E-mail address \_\_\_\_\_
2. Name of Insurance Agent/Consultant \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_  
E-mail address \_\_\_\_\_
3. Name of Investment Advisor \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_  
E-mail address \_\_\_\_\_
4. Name of Banker \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_  
E-mail address \_\_\_\_\_
5. Safe Deposit Box  
Bank \_\_\_\_\_ Branch Location \_\_\_\_\_  
Persons Listed on Signature Card \_\_\_\_\_

GIFTING HISTORY

Have you ever made a gift in excess of \$10,000 to a single recipient?

Husband:  Yes  No

Wife:  Yes  No

If yes, please send copies of all gift tax returns with this Questionnaire.