Helping you protect what's important

CONFIDENTIAL INITIAL MEETING ESTATE PLANNING QUESTIONNAIRE

PREPARED BY

Frisse & Brewster Law Offices, LLC

Estate Planning, Trust & Estate Settlement, Farm & Business Planning & VA Planning

111 Sheriff Street
PO Box 430
Paris, Illinois 61944
217-465-1234
Fax 217-463-4005

Other Locations
By Appointment Only
Effingham
Toll Free from Illinois & Indiana
800-734-7550

2901 Ohio Blvd.
Suite 110
Terre Haute, Indiana 47803
812-234-2777
Fax 812-232-1209

Website: www.frissebrewsterlaw.com

We understand that this questionnaire is designed to provide important information for estate planning purposes and that the firm's ability to advise clients with respect to lifetime and testamentary disposition of assets, with minimization of adverse tax consequences, depends on the accuracy and completeness of such information. We hereby confirm that such information is substantially correct and complete.

INTRODUCTION

This form **must** be filled out completely, and returned to our office prior to your scheduled initial meeting appointment. An envelope has been included with this packet for you to return the completed form. We need to have approximate values of your assets, as well as the exact way they are owned (individually, jointly, in a trust, etc.).

We cannot analyze your estate planning needs and make appropriate recommendations without a complete, honest, and accurate picture of your current and projected financial situation. That includes asset values, how your assets are titled (or, for beneficiary-designated assets, the identity of beneficiaries), liabilities and their amounts, and your general family situation.

The personal and financial information requested on the following pages is important because it will be used throughout that estate planning process, and it is therefore imperative that the information provided be complete and accurate.

At your initial meeting with the attorney, you will be discussing your estate planning goals and objectives. The attorney will then make some recommendations and talk to you about the estate planning process in more detail. Please be sure to complete the portion of the questionnaire titled “What’s Important To You” beginning on page 14.

If you decide to proceed with a Trust Based Estate Plan or more comprehensive type of estate planning, it will be necessary to complete additional, more detailed intake forms. We will provide you with the necessary forms at the appropriate time.

We look forward to the opportunity of helping you with your estate planning needs.

PLANNING PROCESS AND PROCEDURES

At **FRISSE & BREWSTER LAW OFFICES, LLC,** the emphasis is on the client. We pride ourselves in being **client-centered** and **relationship-based** in our interaction with our clients during the estate planning process.

There are a number of steps to be a successful estate plan:

- ***Objectives:*** It is impossible to plan for the transfer of your "estate" unless we understand you, your family, your goals, your aspirations, your values and your hopes for your loved ones. The first step in the estate planning process, therefore, involves learning about you and what you expect from the process and how we can best help you achieve that.
- ***Education:*** The next step involves making sure that you understand the process and the issues involved. Often, those issues are complex, involving detailed estate, gift and income tax principles. We make every attempt to explain the issues in a simple and straightforward manner, involving you in the process. We encourage you to ask questions, and we make the process as interactive as possible.
- ***Design:*** Once the legal and tax landscape has been explained and navigated, we design your plan. The plan design is determined by you, with our guidance and through close questioning regarding issues relevant to your personal, family and financial situation.
- ***Drafting:*** Once the plan has been designed, the process of drafting documents begins. Those documents may include a Living Trust with a Pour Over Will, a Durable Power of Attorney for Property, a Durable Power of Attorney for Health Care, a Living Will, a HIPAA Authorization and an End of Life Statement. Additional planning may include use of Irrevocable Trusts, Business Entities, IRA Trusts and Educational Trusts as well as other estate planning tools.
- ***Signing:*** Once the documents have been drafted, a meeting is scheduled with you to review each of the documents in your estate plan and explain the various provisions of each one. After a thorough review and explanation of each document, we will have you sign each one.
- ***Asset Transfers:*** One of the most important, and one of the most overlooked and ignored, aspects of the estate plan is the process of transferring assets into the Trust or "funding". Transferring and re-titling assets, and designating appropriate beneficiaries, are as important to the effectiveness of an estate plan

as the documents drafted by the attorney. Failure to make the necessary asset transfers often results in an estate plan that, although well-drafted, is totally ineffective to accomplish your objectives. We work with you to make sure that your estate plan is fully funded. These integrated parts of the plan are critical to an estate plan that works.

- ***Follow-Up***: We encourage our clients to keep their plans current through our ***Annual Maintenance Program*** which involves annual meetings to thoroughly review the estate plan and the funding involved. Considering the pace of change of tax laws, IRS rulings, case law, and the client's personal, financial and family situations, we feel that an annual review is not only wise, but absolutely necessary for most clients. In order to ensure that your estate plan and all its components are complete, and that all aspects of the plan have been implemented, you will automatically be enrolled in a one-year access and review program as part of your estate planning engagement. During that year, you will have reasonable access to the estate planning attorneys and staff at Frisse & Brewster Law Offices, LLC. At the end of that year, you will be offered the opportunity to enroll in our ***Annual Maintenance Program*** at the annual fee in effect for that plan.

FRISSE & BREWSTER LAW OFFICES, LLC CANNOT TAKE RESPONSIBILITY FOR THE CONTINUED EFFECTIVENESS OF AN ESTATE PLAN THAT HAS NOT BEEN REVIEWED BY OUR OFFICE FOR A PERIOD IN EXCESS OF ONE YEAR.

PRIVACY POLICY

Privacy of non-public personal information has become a much discussed topic in the news, especially because of new federal laws that apply to financial institutions. Attorneys have always been and continue to be bound by professional standards of confidentiality that are more restrictive as to the disclosure of confidential client information than those required by new federal privacy laws. Attorneys are bound by their professional rules of ethics to protect clients' right to privacy.

In the course of providing clients with legal services, we may receive non-public personal information from the client or from third parties with the client's authorization. We do not disclose non-public personal information about clients or former clients, except as authorized by the client or as required or permitted under the applicable law and rules of professional ethics.

We retain records relating to the professional services we provide to better assist a client's needs and, in some cases, to comply with professional guidelines. Access to non-public personal information regarding clients is restricted to those persons who must have access to the records to provide the services requested by the client (for example, a tax preparation service). We maintain physical, electronic, and procedural safeguards to protect a client's non-public personal information in accordance with our professional standards.

DATE: ______________________ **GENERAL INFORMATION**

Full Legal Name Husband:	Full Legal Name Wife:
How does your name appear on tax returns Husband:	How does your name appear on tax returns Wife:
How do you typically sign legal documents Husband:	How do you typically sign legal documents Wife:
Common Name Husband:	Common Name Wife:
Residence Address:	
County of Residence:	
Country of Citizenship*: Husband:	 Wife:
Residence Telephone:	
Mobile Telephone: Husband:	 Wife:
Home Fax:	
E-Mail Address: Husband:	 Wife:
Employer/Business Name: Husband:	 Wife:
Employer/Business Address: Husband:	 Wife:
Employer/Business Telephone: Husband:	 Wife:
Position/Title/Occupation: Husband:	 Wife:
Date of Birth: Husband:	 Wife:
Social Security Number: Husband:	 Wife:

Are you a Veteran or a Spouse of a Veteran?
Do you have a tribal connection to any Native American tribe?
How do you prefer to communicate (Regular mail or E-Mail)?

* It is very important to plan carefully for tax or property consequences that may result from any interstate or international aspects of your estate. If you travel extensively or own residential property in more than one jurisdiction, please be prepared to discuss your views regarding what you consider to be your principal residence.

Community Property Domicile: If you have ever lived in any the following community property states, please indicate which states and the dates you resided in the state – Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas, Washington and Wisconsin:
Married? Date: Place:
Pre-Marital Agreement? If yes, please supply a copy.
Previously married? Husband: _____ Yes _____ No How many times? _____ Wife: _____ Yes _____ No How many times? _____
For each prior marriage of either spouse, indicate name of prior spouse, date of marriage, date of termination (divorce, death) and, if divorced, whether prior spouse is living. **Please supply copies of any divorce decrees.**

Please indicate what estate planning documents are currently in effect and the dates of execution:

Date of Living Trust and Amendments (if any): ________________________________

Date of Will and Codicils (if any): ____

Date of Powers of Attorney (if any): Property: ________ Health Care: _______

Date of Living Will (if any): ____

Date of other estate planning documents (if any): _____________________________

Do you have Long Term Care Insurance? ____ Yes ____ No.

Please supply copies of current documents.

FAMILY

List children in order of birth, and indicate if any are deceased.
(If not from your marriage together, please circle **H**usband or **W**ife.

CHILD'S NAME (first, middle initial, last)		If not from your marriage together, please circle Husband or Wife	**ADDRESS**	**BIRTH DATE**	**SPOUSE**
1.		H or W			
2.		H or W			
3.		H or W			
4.		H or W			
5.		H or W			
6.		H or W			
7.		H or W			
8.		H or W			

List each grandchild, and indicate which of your children that grandchild's parent is.

GRANDCHILD'S NAME (first, middle initial, last)		PARENT (by number, from above)	BIRTH DATE	SPOUSE
1.				
2.				
3.				
4.				
5.				
6.				

Are all of the above persons U.S. Citizens? If not, please explain:

Do any of your children or grandchildren require special consideration? (Consider, for example, their educational, mental, or physical needs). If so, please explain:

Is anyone, other than minor children, dependent on you? _____Yes _____No
If so, please explain who and how?

Is there a Court Order requiring you to pay alimony or child support? _____Yes _____No

Would you like to provide for any children you might have or adopt in the future? _____Yes _____No

Accountant/CPA
Firm/Name:
Address:
Telephone Number:
Financial Advisor
Firm/Name:
Address:
Telephone Number:
Personal Banker/Other
Firm/Name:
Address:
Telephone Number:
Stock Broker/Other
Firm/Name:
Address:
Telephone Number:
Life Insurance Agent
Firm/Name:
Address:
Telephone Number:

AFFILIATIONS AND ORGANIZATIONS

Church Affiliation
Church Name:
Pastor:
Address:
Telephone Number:
Organizations/Community Groups
Name of Entity:
Contact Person:
Telephone Number:
Name of Entity:
Contact Person:
Telephone Number:
Name of Entity:
Contact Person:
Telephone Number:
Charities
Name of Charity:
Contact Person:
Telephone Number:
Name of Charity
Contact Person:
Telephone Number:
Name of Charity:
Contact Person:
Telephone Number:

ASSETS	VALUES	TOTAL NUMBER OF ACCOUNTS/PARCELS
Cash & Notes (Checking, Savings, CDs, Money Market, money owed to you)	$	
Real Estate (Residential/Commercial/Farmland/Rental/Time Shares/Cemetery Plots)	$	
Securities (Stock/Mutual Funds/Bonds)	$	
Business Interests (Corporation/LLC/Partnerships/etc.)	$	
Life Insurance (death benefit) (Whole/Term/Variable/Universal/etc.)	$	
Annuities	$	
Qualified Retirement Plans & IRAs (Traditional IRA/Keogh/SEP/Roth/Pension/401k/Profit Sharing)	$	
Non-Qualified Employee Benefits (Deferred Comp/ESOP/etc.)	$	
Tangible Personal Property (Furniture/Autos/Collections/Jewelry/etc.)	$	
Miscellaneous	$	
TOTALS	$	
LIABILITIES		
Mortgages	$	
Loans/Notes	$	
Other Liabilities (Taxes/Student Loans/Credit Cards/etc.)	$	
TOTALS	$	
NET WORTH (Assets minus Liabilities)	$	

Please provide a copy of your most recently-filed tax return (Form 1040), including all schedules and a copy of your most recent financial statement (if any).

PLANNING ISSUE	IMPORTANCE (Least being 1 and Most being 5) Please circle your choice
Retaining Control during lifetime	1 2 3 4 5
Planning for incapacity	
Financial Management	1 2 3 4 5
Health Care Decisions	1 2 3 4 5
Avoiding Probate	
Cost	1 2 3 4 5
Delay	1 2 3 4 5
Complication	1 2 3 4 5
Publicity	1 2 3 4 5
Spousal Protection	
Creditor Protection	1 2 3 4 5
Medicaid Protection	1 2 3 4 5
Investment Assistance	1 2 3 4 5
Remarriage Protection	1 2 3 4 5
Estate Tax Planning	1 2 3 4 5
Keeping Assets in the Bloodline	1 2 3 4 5
Planning for Beneficiaries "Special Needs"	1 2 3 4 5
Planning for Adult Children	
Investment Assistance	1 2 3 4 5
Tax & Administrative Assistance	1 2 3 4 5
Divorce Protection	1 2 3 4 5
Creditor Protection	1 2 3 4 5
Medicaid Protection	1 2 3 4 5
Special Bequests to Individuals	
Monetary	1 2 3 4 5
Property (business, farm, etc.)	1 2 3 4 5
Personal Effects	1 2 3 4 5
Special Bequests to Charities	1 2 3 4 5

Please review your answers above and list the top 3 issues that are most important to you:
1.
2.
3.

Please list any other concerns: