



*Helping you protect what's important*

**CONFIDENTIAL  
INITIAL MEETING  
SPECIAL NEEDS  
QUESTIONNAIRE**

PREPARED BY

**Frisse & Brewster Law Offices, LLC**

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

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Toll Free from Illinois & Indiana  
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**DATE:** \_\_\_\_\_

**GENERAL INFORMATION**

Full Legal Name:
How does your name appear on tax returns:
How do you typically sign legal documents:
Common name:
Residence Address:
County of Residence:
Country of Citizenship*:
Residence Telephone:
Mobile Telephone:
Home Fax:
Residence E-Mail Address:
Employer/Business Name:
Employer/Business Address:
Employer/Business Telephone:
Position/Title/Occupation:
Date of Birth:
Social Security Number:
Are you a Veteran or a Spouse of a Veteran?
Do you have a tribal connection to any Native American tribe?



## FAMILY

List children in order of birth, and indicate if any are deceased.  
 (If not from your marriage together, please circle **Husband** or **Wife**.)

<b>CHILD'S NAME</b> (first, middle initial, last)		If not from your marriage together, please circle Husband or Wife	<b>ADDRESS</b>	<b>BIRTH DATE</b>	<b>SPOUSE</b>
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.

<b>GRANDCHILD'S NAME</b> (first, middle initial, last)		<b>PARENT</b> (by number, from above)	<b>BIRTH DATE</b>	<b>SPOUSE</b>
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				

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

**FAMILY – CONT'D**

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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? <input type="checkbox"/> Yes <input type="checkbox"/> No
If so, please explain who and how?

Is there a Court Order requiring you to pay alimony or child support? <input type="checkbox"/> Yes <input type="checkbox"/> No

Would you like to provide for any children you might have or adopt in the future? <input type="checkbox"/> Yes <input type="checkbox"/> No

## ADVISORS

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

## AFFILIATIONS AND ORGANIZATIONS

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<b>Faith-Based or Religious Affiliation</b>
Organization's Name:
Leader/Director:
Address:
Telephone Number:
<b>Organizations/Community Groups</b>
Name of Entity:
Contact Person:
Telephone Number:
Name of Entity:
Contact Person:
Telephone Number:
Name of Entity:
Contact Person:
Telephone Number:
<b>Charities</b>
Name of Charity:
Contact Person:
Telephone Number:
Name of Charity:
Contact Person:
Telephone Number:
Name of Charity:
Contact Person:
Telephone Number:

## FINANCIAL SUMMARY

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

Please be prepared to 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).

06/07/2017