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ESTATE PLANNING QUESTIONNAIRE
(Married Couple)

1. Name_______________________________________ U.S. Citizen? ❒Yes ❒No
   Birthdate_____________________ Social Security Number____________________

2. Spouse_______________________________________ U.S. Citizen? ❒Yes ❒No
   Birthdate_____________________ Social Security Number____________________

3. Address____
   Street City State Zip
   Phone (home)_______________ (work)______________ (cell)_______________
   Spouse's phone numbers (work)______________ (cell)_______________

4. Date married ____________ Where were you married __________________________

   Have you been married before?
   Husband: ❒Yes ❒No If Yes, list the following:
   Date married__________ Date separated/divorced_________
   Wife: ❒Yes ❒No If Yes, list the following:
   Date married___________ Date separated/divorced_________

   Are there any special restrictions/conditions from the prior marriage? (Examples: support, requirement to name ex-spouse or children as beneficiaries of life insurance policies, etc.)
   ❒Yes ❒No ❒Unknown
   If Yes, briefly state what those requirements are:______________________________
   ____

   How long have you resided in Washington? Husband__________ Wife_________
   Where else have you lived (states/countries only)? Husband__________ Wife_________

5. Do you have children? ❒Yes ❒No If Yes, list the following:

a. Children of this marriage:

Name	Date of Birth	City/State of Residence

b. Children of prior marriages/relationships:

H/W	Name	Date of Birth	City/State of Residence
❒H ❒W			
❒H ❒W			
❒H ❒W			
❒H ❒W			
❒H ❒W			
❒H ❒W			

If any of the children listed in 5.a and 5.b are adopted, place an "A" beside the child's name.

d. Do you have any deceased children? ❒Yes ❒No If yes, provide the following:

Name of child______________________________ Date of death________________

Name of child______________________________ Date of death________________

Children of deceased child, if applicable:

Name	Date of Birth	City/State of Residence

6. Why are you writing a Will? (Check all those that apply)

❒ Never had one

❒ Contemplating marriage/divorce

❒ Have child(ren) especially concerned about or who has special needs

❒ Want to disinherit someone

❒ Concerned about probate

❒ Want to make gift to specific person/charity

❒ Other (describe):____

7. In general terms, how do you want your property to be distributed on your death? (Don't worry about exact detail; we'll review this when you come in)

____

____

____

____

____

8. Who do you want to be your executor?

Name:____ City, State:________________________

Backup? Name:________________________________ City, State:________________________

9. If you have minor children, how old should they be to inherit? (The law presumes age 18) _______

10. What do you own?

REAL ESTATE

a. Do you own the home in which you live? ❒Yes ❒No If yes, state the following:

Fair Market Value (likely sale price): $____

Total of mortgages on property: $____

Whose name is on the title?____

b. Do you own any other real estate? ❒Yes ❒No If yes, list the following:

Address (or other description)	Fair Market Value	Debts on Property	Names on Title (H/W/Both/Other)
_______________________	$__________	$__________	_____________________________
_______________________	$__________	$__________	_____________________________

BANK ACCOUNTS (basic checking, passbook savings, and certificates of deposit):

Checking accounts

Institution	Amount	Names on Account
__________________________	$__________	____
__________________________	$__________	____
__________________________	$__________	____

Savings accounts

Institution	Amount	Names on Account
__________________________	$__________	____
__________________________	$__________	____
__________________________	$__________	____

Certificates of Deposit

Institution	Amount	Names on Account
__________________________	$__________	____
__________________________	$__________	____
__________________________	$__________	____

STOCKS/BONDS/MUTUAL FUNDS (but NOT retirement accounts)

Company	Current Value	Names on Shares/Bonds
__________________________	$__________	____
__________________________	$__________	____

LIFE INSURANCE (personal, mortgage cancellation, employer-provided, etc.)

Insurer	Death Benefit	Type of Insurance (Term/Whole Life)	Beneficiary
____________	$__________	____________	____________
____________	$__________	____________	____________

RETIREMENT ACCOUNTS (401(k)s, IRAs, Roth IRAs, pensions)

Type of Account	Amount	Beneficiary
____________	$__________	____________
____________	$__________	____________

VEHICLES (cars, trucks, motor homes, boats, etc.)

Make/Model/Year	Fair Market Value	Debt Owing	Names on Title (H/W/Both/Other)
____________	$__________	$__________	____________
____________	$__________	$__________	____________
____________	$__________	$__________	____________
____________	$__________	$__________	____________
____________	$__________	$__________	____________

PERSONAL PROPERTY (household furnishings, jewelry, antiques, guns)

For items that are worth more than $3,000, describe:

Item____________________________________ Estimated value $__________

Item____________________________________ Estimated value $__________

BUSINESS INTERESTS (partnership/sole proprietorship/corporation)

Do you own an interest in a business? ❐Yes ❐No If yes, list the following:

a. Name of Business____________________________________

b. Your interest in business (i.e., sole owner, partner, etc.)____________________

c. Estimated Value: $____________________________________

MONEY OWED TO YOU (promissory note, land contract, etc.) If others owe you money, state:

Who owes you money	Amount owed	Describe written evidence of debt
____________	$__________	____________
____________	$__________	____________
____________	$__________	____________
____________	$__________	____________

11. OTHER DEBTS - do you owe anyone else money not already listed above? If so, list:

To Whom	How much	What kind of debt
________________	$__________	________________
________________	$__________	________________

12. Do you have:

Community Property Agreement?	❐Yes	❐No
Will?	❐Yes	❐No
Trust?	❐Yes	❐No
Durable Power of Attorney?	❐Yes	❐No
Advance Directive/Living Will?	❐Yes	❐No
Prenuptial/Post-Nuptial Agreement?	❐Yes	❐No

13. If you are anticipating an inheritance or gift in the next ten years, describe:

From Whom	Approximately how much
________________________	$______________
________________________	$______________

14. Have you made any large gifts (more than $10,000 to one person in a year)? ❐Yes ❐No

15. Are you planning on moving from Washington? ❐Yes ❐No

DISCLAIMER

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By submitting this form, you agree that no information disclosed by you shall prohibit WALSTEAD MERTSCHING PS or its individual attorneys from representing a different client in this matter.

FOR ATTORNEY'S USE ONLY

Documents to be prepared:

- ❐ Wills for husband and wife
- ❐ Community Property Agreement
- ❐ Durable Powers of Attorney for husband and wife
- ❐ Health Care Directives for husband and wife
- ❐ Letter to client
- ❐ Statement - fee to be charged: $______________________________