

ACP LAW



ANNA CATHERINE PELLIGRA, ESQ.
WILLS, TRUSTS & ESTATES

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ESTATE PLANNING QUESTIONNAIRE

PERSONAL INFORMATION

CLIENT 1

Full Legal Name:

Residential Address:

Telephone:

Email:

Employment:

U.S. Citizen?

Prior Marriage?

Existing Estate Plan?

If yes, when was your last plan executed?

CLIENT 2

Full Legal Name:

Residential Address:

Telephone:

Email:

Employment:

U.S. Citizen?

Prior Marriage?

Existing Estate Plan?

If yes, when was your last plan executed?

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CHILDREN INFORMATION:

	Full Legal Name	Date of Birth
1)		
2)		
3)		
4)		
5)		

Are there any child specific needs/comments?

FINANCIAL INFORMATION

Financial Advisor

Name:

Company/Institution:

Email:

Phone:

Accountant

Name:

Company/Institution:

Email:

Phone:

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ASSETS:

Real Estate Properties

	Address	Estimated Value	Primary Residence?	Ownership?
1)				
2)				
3)				
4)				

Cash Equivalents (Savings, Checking, CDs, Money Markets, etc.)

	Institution	Estimated Value	Jointly Held?
1)			
2)			
3)			
4)			

Qualified Retirement Accounts (401(k), Profit Sharing, Fixed Annuity, IRA, Roth IRA, etc.)

	Institution	Type	Estimated Value	Client 1	Client 2
1)					
2)					
3)					
4)					

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Investments (Stocks, Bonds, Mutual Funds, etc.)

Institution	Type	Estimated Value	Client 1	Client 2
1)				
2)				
3)				
4)				

Life Insurance

Insurance Co.	Insured	Amount of Coverage	Type of Coverage (Whole, Term, Variable)
1)			
2)			
3)			
4)			

BUSINESS OWNERSHIP:

	Business #1	Business #2	Business #2
Business Name			
Estimated Value			
Nature of Business			
Type of Entity (Corp, S-Corp, LLC, etc.)			
% of Ownership			
Business Succession Plan?			

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