

ESTATE PLANNING QUESTIONNAIRE

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DATE: _____ 20____.

Question #1: Do you expect any “fights / disputes” regarding anything in this document?

YES / NO

Question #2: Is there anybody who you would like to “leave nothing to” who may expect to otherwise receive something from your estate after you die?

YES / NO

IF THE ANSWER TO EITHER IS YES: Please notify our office when returning this form.

PERSONAL AND FAMILY DATA

Personal Information

a. **Wife:**

i. Full legal name: _____

ii. Residence address: _____

iii. Telephone: _____ cell / home

iv. Email: _____

v. Date of Birth _____

b. **Husband:**

i. Full legal name: _____

ii. Residence address: _____

iii. Telephone: _____ cell / home

iv. Email: _____

v. Date of Birth _____

Marriage Date: _____ **Marriage City & State:** _____

Year Ohio residence established: _____

WILL PROVISIONS DESIRED BY CLIENT

1. General Disposition Intentions (a.k.a. “who gets my stuff?”)

a. First “taker” =

- i. **Name:** _____
- ii. **City and State of residence** _____
- iii. **Relationship between you and them** _____

a. (Tip: Most married couples wish their entire estate go to their spouse if they survive them. If you desire an alternate distribution, please let us know.)

b. Alternate “taker(s)” =

(Tip: If their “first taker” is unable or unwilling to inherit from you: most “surviving spouses” list their children, in equal shares. However, this is not a requirement under Ohio law. We can further discuss if you have questions.)

a. For each person:

- i. **Name:** _____
- ii. **City and State of residence** _____
- iii. **Relationship between you and them** _____
- iv. **Percentage of share?** _____

b. For each person:

- i. **Name:** _____
- ii. **City and State of residence** _____
- iii. **Relationship between you and them** _____
- iv. **Percentage of share?** _____

c. For each person:

- i. **Name:** _____
- ii. **City and State of residence** _____
- iii. **Relationship between you and them** _____
- iv. **Percentage of share?** _____

d. For each person:

- i. **Name:** _____
- ii. **City and State of residence** _____
- iii. **Relationship between you and them** _____
- iv. **Percentage of share?** _____

Question #3: CIRCLE ONE: If an “alternate taker” is unable or unwilling to inherit from you and that alternate taker has lineal descendants (children, grandchildren, etc.), would you prefer for (1) their share to pass lineally downward to their descendants?

Or, alternatively (2) be distributed equally among the remaining “alternate takers” you have designated?

c. **Specific Bequests:**

a. **Do you want anybody to get any specific items from you?**

- a. **Name:** _____
- b. **City / State of residence:** _____
- c. **Item(s) (list details!):** _____
- d. **Does this count against their overall share percentage? YES / NO**
- e. **If they are unable to inherit this item:** _____

b. **Do you want anybody to get any specific items from you?**

- a. **Name:** _____
- b. **City / State of residence:** _____
- c. **Item(s) (list details!):** _____
- d. **Does this count against their overall share percentage? YES / NO**
- e. **If they are unable to inherit this item:** _____

c. **Do you want anybody to get any specific items from you?**

- a. **Name:** _____
- b. **City / State of residence:** _____
- c. **Item(s) (list details!):** _____
- d. **Does this count against their overall share percentage? YES / NO**
- e. **If they are unable to inherit this item:** _____

d. **Disposition of Residue (anything “left over” after everything else is distributed. This rarely occurs):**

(Tip: Pick a person NOT listed as a general heir elsewhere in your Will. You can also pick an entity such as a charity or church if you like.)

a. **For each person/entity:**

- i. **Name:** _____
- ii. **City and State** _____
- iii. **Relationship between you and them** _____
- iv. **Percentage of share?** _____
- v. **Any restrictions on its use?** _____

e. **Ultimate Beneficiary (the “last ditch recipient” of anything otherwise unable to be distributed under your Will. This also rarely occurs. Failure to designate such a person means all such property will go to the State of Ohio!)**

(Tip: Pick a person NOT listed as a general heir elsewhere in your Will. You *can* designate the same person that you designated as the recipient of the “Disposition of Residue” of your Estate.

You can also pick an entity such as a charity or church if you like)

a. **For each person/entity:**

- i. **Name:** _____
- ii. **City and State** _____
- iii. **Relationship between you and them** _____
- iv. **Percentage of share?** _____
- v. **Any restrictions on its use?** _____

Personal Representative (a.k.a. "Executor"):

It is advisable for the surviving spouse to serve as Executor.

If he or she does not wish to serve, another responsible person (possibly adult children or attorney) can normally serve as such.

For Wife:

1) Initial Executor:

- a. Name: _____
- b. Relationship to you: _____
- c. Telephone: _____ cell / home
- d. Residence address: _____

2) 1st Alternate Executor:

- a. Name: _____
- b. Relationship to you: _____
- c. Telephone: _____ cell / home
- d. Residence address: _____

3) 2nd Alternate Executor:

- a. Name: _____
- b. Relationship to you: _____
- c. Telephone: _____ cell / home
- d. Residence address: _____

For Husband: Same as above? YES / NO
(If no, fill out next page for Husband)
(If same: skip next page)

For Husband ONLY if different from Wife's choices on previous page:

1) Initial Executor:

- a. Name: _____
- b. Relationship to you: _____
- c. Telephone: _____ cell / home
- d. Residence address: _____

2) 1st Alternate Executor:

- a. Name: _____
- b. Relationship to you: _____
- c. Telephone: _____ cell / home
- d. Residence address: _____

3) 2nd Alternate Executor:

- a. Name: _____
- b. Relationship to you: _____
- c. Telephone: _____ cell / home
- d. Residence address: _____

For Husband to fill out ONLY if different from Wife's choices on previous page!

Guardians for Minor Children (if any):

Until minor children reach age 18, they **must** have a guardian appointed with respect to both their person and any property they may own individually. **Usually** the surviving parent is named Guardian of the property (a parent is generally automatically Guardian of the person). **Some other person should be named in the alternative** in the event neither parent survives. It is **HIGHLY RECOMMENDED** that you **NOT “jointly appoint” a couple** due to the possibility that one-half of the couple may be unable or unwilling to serve!!

For Wife:

1) Initial Guardian:

- a. Name: _____
- b. Relationship to you: _____
- c. Telephone: _____ cell / home
- d. Residence address: _____

2) 1st Alternate Guardian:

- a. Name: _____
- b. Relationship to you: _____
- c. Telephone: _____ cell / home
- d. Residence address: _____

3) 2nd Alternate Guardian:

- a. Name: _____
- b. Relationship to you: _____
- c. Telephone: _____ cell / home
- d. Residence address: _____

For Husband: Same as above? YES / NO
(If no, fill out next page for Husband)
(If same: skip next page)

For Husband ONLY if different from Wife's choices on previous page:

1) Initial Guardian:

- a. Name: _____
- b. Relationship to you: _____
- c. Telephone: _____ cell / home
- d. Residence address: _____

2) 1st Alternate Guardian:

- a. Name: _____
- b. Relationship to you: _____
- c. Telephone: _____ cell / home
- d. Residence address: _____

3) 2nd Alternate Guardian:

- a. Name: _____
- b. Relationship to you: _____
- c. Telephone: _____ cell / home
- d. Residence address: _____

For Husband to fill out ONLY if different from Wife's choices on previous page!

Other information

(Optional, but helpful for the future, especially after your passing)

Prior Marriages:

For Wife:

Ex #1's name: _____

Date of prior marriage: _____

Children born of marriage: _____

Date of termination of marriage: _____

Ex #2's name: _____

Date of prior marriage: _____

Children born of marriage: _____

Date of termination of marriage: _____

For Husband:

Ex#1's name: _____

Date of prior marriage: _____

Children born of marriage: _____

Date of termination of marriage: _____

Ex #2's name: _____

Date of prior marriage: _____

Children born of marriage: _____

Date of termination of marriage: _____

Attach extra sheets if necessary

Children (including those you have legally adopted):

Question #4 (optional, but helpful to know!): Do you plan to adopt in future? YES / NO

Child #1:

Child's name: _____
Child's other parent (if not your current spouse): _____
Child's birthday: _____
Child's address (if not the same as yours): _____
Child's email: _____
Child's phone: _____ cell / home
Child's spouse (if any): _____
Child's children (if any): _____
Child's occupation: _____

Child #2:

Child's name: _____
Child's other parent (if not your current spouse): _____
Child's birthday: _____
Child's address (if not the same as yours): _____
Child's email: _____
Child's phone: _____ cell / home
Child's spouse (if any): _____
Child's children (if any): _____
Child's occupation: _____

Child #3:

Child's name: _____
Child's other parent (if not your current spouse): _____
Child's birthday: _____
Child's address (if not the same as yours): _____
Child's email: _____
Child's phone: _____ cell / home
Child's spouse (if any): _____
Child's children (if any): _____
Child's occupation: _____

Attach extra sheets if necessary

Real Estate:

Location and Type	Approximate Market Value of Equity	Cost Basis	How Is Title Held? “Survivorship Deed?” “Tenancy-in-Common?”

Insurance:

Company and Policy Number	Death Benefit	Approximate Cash Value	Person Insured	Owner	Beneficiary

Cash Accounts:

Institution	Approximate Balance	In Whose Name(s)?

Thank you for your interest in allowing the George E. Moore Law Office, LLC to help you achieve your estate planning goals.

In order to allow us to assist you, and to begin an Attorney-Client relationship, please contact us at your convenience.

We look forward to working together with you.

