

Have you ever made any taxable gifts? (Over \$11,000 per person per calendar year) () YES () NO
Please provide copies of any gift tax returns that have been filed

Do you own any Subchapter S stock? () YES () NO

Do you own long term care insurance? () YES () NO
If yes please list the following information for each policy:

<u>INSURANCE COMPANY</u>	<u>CASH VALUE</u>	<u>EFFECTIVE DATE</u>	<u>CARE LEVEL</u>	<u>ACCOUNT NUMBER</u>
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Are you a member in a closely held corporation? () YES () NO

Do you own shares of stock in a closely held corporation? () YES () NO

Have you made any transfers of property in the last three years of a value over \$11,000? () YES () NO

Do you own or have an interest in any patents? () YES () NO

Do you own or have an interest in any copyrights? () YES () NO

Do you have a Power of Appointment over any property? () YES () NO

Do you have any life insurance policies on your life? () YES () NO Your spouse's? () YES () NO

If yes please list the following information for each policy:

<u>INSURANCE COMPANY</u>	<u>BENEFICIARY(S)</u>	<u>CASH VALUE</u>	<u>POLICY VALUE</u>	<u>ACCOUNT NUMBER</u>
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BANKING INFORMATION

Please list the following information:

<u>TYPE OF ACCOUNT</u>	<u>ACCOUNT NUMBER</u>	<u>APPROX. ACCOUNT BALANCE</u>	<u>JOINTLY HELD</u>	<u>BANK NAME</u>
CHECKING			() YES () NO	

CHECKING _____ () YES () NO _____

CHECKING _____ () YES () NO _____

SAVINGS _____ () YES () NO _____

SAVINGS _____ () YES () NO _____

MONEY MARKET _____ () YES () NO _____

MONEY MARKET _____ () YES () NO _____

SAFE DEPOSIT BOX _____ () YES () NO _____

MUTUAL FUND _____ () YES () NO _____

MUTUAL FUND _____ () YES () NO _____

ANNUITIES _____ () YES () NO _____

ANNUITIES _____ () YES () NO _____

INVENTORY OF ASSETS
Please estimate the current market values

<u>ASSET</u>	<u>OWNED BY YOU?</u>	<u>OWNED BY SPOUSE?</u>	<u>JOINTLY OWNED</u>
Residence (minus mortgage)	\$ _____	\$ _____	\$ _____
Second residence (minus mortgage)	\$ _____	\$ _____	\$ _____
Jewelry	\$ _____	\$ _____	\$ _____
Firearms	\$ _____	\$ _____	\$ _____
Home furnishings	\$ _____	\$ _____	\$ _____
Collections	\$ _____	\$ _____	\$ _____
Collections	\$ _____	\$ _____	\$ _____
Collections	\$ _____	\$ _____	\$ _____
Automobile	\$ _____	\$ _____	\$ _____
Automobile	\$ _____	\$ _____	\$ _____
Automobile	\$ _____	\$ _____	\$ _____
Boat	\$ _____	\$ _____	\$ _____
Business interests	\$ _____	\$ _____	\$ _____
Mortgages you hold	\$ _____	\$ _____	\$ _____

PENSION INFORMATION

ACCOUNT # VALUE BENEFICIARY(S) PAYMENT FOR LIFE / LUMP SUM?

IRA INFORMATION

ACCOUNT # VALUE BENEFICIARY(S) PAYMENT FOR LIFE / LUMP SUM?

PROPERTY ADDRESSES

ADDRESS VALUE MORTGAGED AMOUNT

PLANNING OBJECTIVES

- | | |
|---|------------------------------------|
| Providing for others () | Minimization of estate taxes () |
| Coordination with retirement planning () | Business Succession Planning () |
| Generation skipping estate planning () | Considering a living trust () |
| Charitable gift planning () | Planning for long term care () |
| Management of your affairs if incapacitated () | Other objectives or concerns _____ |

PLEASE PROVIDE US WITH A FAMILY TREE