

Robles Law, P.A.

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ESTATE PLANNING QUESTIONNAIRE

Full name: _____

Social security number: _____ Birth date: _____

Home address: _____

Phone Number: _____ Cell: _____

Previously Married? Yes _____ No _____ If Yes, ended in: Divorce Widowed

Email: _____

Have you lived out of state? If Yes, which states: _____

Date you moved to Florida: _____

Do you have other residences in Florida or Out of State? Yes _____ No _____ Where: _____

Birthplace: _____ Are you a U.S. citizen? Yes _____ No _____

If U.S. citizen other than by birth, state date of citizenship: _____

Occupation: _____

Employer: _____

Do you have children (including stepchildren or foster children)? Yes _____ No _____

If yes, please provide the following information for each:

Name: _____ Date of Birth: _____ Age: _____

Address: _____ Phone: _____

Name: _____ Date of Birth: _____ Age: _____

Address: _____ Phone: _____

Name: _____ Date of Birth: _____ Age: _____

Address: _____ Phone: _____

Name: _____ Date of Birth: _____ Age: _____

Address: _____ Phone: _____

Do you have any children/grandchildren who have medical conditions, special needs, or on social benefits? YES NO

Do you presently have a will? Yes _____ No _____ If so, what is the date on the will? ____

Was it signed in Florida? Yes _____ No _____ If not, where? _____

ASSETS

A. Assets: cash; savings accounts; checking accounts; money market accounts; certificates of deposit; mutual funds, corporation stocks and bonds (publicly listed); unlisted stocks and bonds; government bills, notes, and bonds; commodities; automobiles; other vehicles (airplanes, boats, motorcycles, recreational vehicles); precious metals; safe deposit contents; household goods, furniture, and appliances; china, crystal, and silver; jewelry; art works; family heirlooms, artifacts, and antiques; tools and machinery; musical instruments; valuable livestock/animals; pets; money owed to you (personal loans, etc.); vested interest in profit sharing plan, stock options, etc.; limited partnerships; trust interest; vested interest in retirement plans, IRAs, death benefits, annuities; life insurance; miscellaneous personal property not already listed:

Type of Account:	Location (Bank Name/Address)	Value
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

B. Real estate: agricultural land; boat/marina slip; cemetery plots; condominiums; cooperatives; timeshares; duplexes; houses; mobile homes; rental properties; undeveloped land; vacation homes:

Property Address (including county)	Value
_____	_____
_____	_____
_____	_____
_____	_____

TOTAL NET VALUE OF ALL ASSETS _____

LIABILITIES

A. Personal/Property debts (mortgages, personal loans with banks, major credit card debt, etc.) and other personal debts:

Item Description	Amount Due	Due Date
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

TOTAL LIABILITIES _____

HEALTH ISSUES and CONSULTANTS

Describe your health (good, fair, poor) and any illnesses that you have: _____

State the name and contact information for your physician: _____

Do you have Life/Disability/Long Term Care insurance? Yes _____ No _____
If yes, please provide the name of the company and the value of the insurance: _____

Name and contact information for your attorney: _____

Name and contact information for your accountant: _____

Name and contact information for your insurance agent: _____

Name and contact information for your investment advisor (broker, banker, etc.): _____

DOCUMENTS CLIENT SHOULD BRING TO INTERVIEW

1. Prior and present Wills
2. Trust instruments in which client is settlor, trustee, or beneficiary
3. Financial statement
4. Real and personal property tax bills
5. Deeds to property
6. Mortgages
7. Life insurance policies and annuities and summary of current owner and beneficiary provisions
8. Statements relating to certificates of deposit, and money market certificates
9. Stockholder or partnership agreements
10. Pension and profit-sharing plans and summary of current benefits
11. Instruments under which client has any interest or power of appointment
12. Prenuptial, postnuptial, or separation agreements, if applicable
13. Judgments of dissolution of marriage, if applicable
14. Court orders or agreements under which client is obligated to provide support, if applicable
15. Powers of attorney
16. Living will and designation of health care surrogate