

Date Completed _____

HEMPHILL GELDER, P.C.

ESTATE PLANNING QUESTIONNAIRE

Return the completed questionnaire *at least 5 days prior* to appointment it by fax, e-mail (preferred) or mail to:

Fax: 919.899.9091	E-mail: forms@hemphillgelderlaw.com	Mail: 8386 Six Forks Rd., Suite 201 Raleigh, NC 27615
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(888) 443-1446

Limited Purpose of Questionnaire: Please understand this questionnaire should not be relied upon as legal advice. It is a tool designed to gather information you will need to make informed estate planning decisions. Completing this questionnaire does not establish an attorney-client relationship. If you decide to retain this firm, we will establish our attorney-client relationship with an engagement letter.

PERSONAL INFORMATION

CLIENT INFORMATION

NAME on **Driver's License:** _____ Preferred name: _____

Date of Birth: _____ U.S. Citizen? _____ County of Residence: _____

Address: _____

Home phone: (_____) _____ Mobile phone: (_____) _____

Work phone: (_____) _____ Email: _____

MARITAL STATUS

- | | |
|--|--|
| <input type="checkbox"/> Single (never been married) | <input type="checkbox"/> Widow/Widower |
| <input type="checkbox"/> Married | <input type="checkbox"/> Separated |
| <input type="checkbox"/> Divorced | <input type="checkbox"/> Engaged |

CHILDREN

Full Name	Address	Telephone	Date of Birth	From a Prior Relationship?

Date Completed _____

<u>ASSETS OTHER THAN LIFE INSURANCE AND RETIREMENT ACCOUNTS</u>		
<u>Description</u>	<u>Value</u>	<u>Owner</u>
<i>Example: My Home; 123 Blue Bird Lane Anytown, NC</i>	\$150,000.00 (fair market value) \$130,000.00 (mortgage)	Jointly with spouse
<i>Example: SECU Money Market Account</i>	\$10,000.00	My individual account

<u>LIFE INSURANCE AND RETIREMENT ACCOUNTS</u>				
<u>Description</u>	<u>Owner/Policy Holder</u>	<u>Value</u>	<u>Primary Beneficiary</u>	<u>Secondary Beneficiary</u>
<i>Example: My IRA</i>	Self	\$10,000.00	Children Equally	
<i>Example: My Life Insurance</i>	Self	\$50,000.00	Mother and Father	

Do you have a prenuptial, postnuptial, or separation agreement? _____. If so, please bring a copy to our meeting.

Does any member of your family have special needs or receive government assistance of any kind? If so, please explain: _____

Do you own an interest in a closely-held business? _____. If so, please provide the name and describe type of entity (e.g. LLC or S-corporation). _____

Would you estimate the value of all of your assets, including life insurance, to be greater than \$1 million? _____

Do you have an existing Will, Trust, or Power of Attorney? _____. If so, please bring copies to our meeting.

ESTATE PLANNING GOALS

We will discuss your estate planning goals in detail at our meeting. To assist in preparing for the meeting, please explain in your own words who you want to benefit from your estate when you pass away.
(Example: "All of my estate goes to my child in a trust, but if I have no children, then to my parents equally.")

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Check if additional pages attached _____

NOMINATIONS

Please identify potential candidates to serve important roles in your estate plan. We will explain these roles and discuss your selections in greater detail in our meeting.

GUARDIAN OF YOUR MINOR CHILDREN

Definition of Guardian: A Guardian is a person(s) you nominate to provide for the care and custody of your minor children until they become adults. Minor children will typically reside with the Guardian(s) in their home. Under its inherent authority to look after the best interests of the child, the Clerk of Superior Court must approve any Guardian nominated.

If you have minor children, whom would you want to designate as their Guardian?

First Choice (full name):	Relationship:
Second Choice (full name):	Relationship:

TRUSTEE OF TRUST

Definition of Trustee: A Trustee is a person(s) or other representative (including a Trust Company) who has the legal title over and responsibility to manage property for the benefit of a designated person(s). Trustee(s) are often used to manage property for minor children until they attain the age chosen by their parents.

Whom would you want to serve as Trustee?

First Choice (full name):	Relationship:
Second Choice (full name):	Relationship:

NOMINATIONS**EXECUTOR**

Definition of an Executor: An Executor is a person(s) or other representative (including a Trust Company) you appoint under your Will to be responsible for administering your estate. An Executor's duties include filing your Will at the Courthouse after your death, gathering your assets, paying your debts, and distributing property to your beneficiaries. They are also responsible for preparing certain tax returns after your death.

First Choice (full name):	Relationship:
Second Choice (full name):	Relationship:

POWER OF ATTORNEY

A Power of Attorney enables another person to manage your financial affairs when you are not able to do so. Would you like a Power of Attorney? _____

First Choice (full name):	Relationship:
Second Choice (full name):	Relationship:

HEALTH CARE POWER OF ATTORNEY/LIVING WILL

A Health Care Power of Attorney enables another person to make health care decisions for you when you are unable to do so. Would you like a Health Care Power of Attorney? _____

First Choice (full name):		Relationship:
Home phone:	Work phone:	Mobile phone:
Address:		

Second Choice (full name):		Relationship:
Home phone:	Work phone:	Mobile phone:
Address:		

In the Health Care Power of Attorney/Living Will, you have the option to express your desires concerning life-prolonging measures (for example, ventilator or artificial nutrition) in the event that you are terminally ill and unable to make your own health care decisions. We will discuss your options at our meeting.

Three options available to you include:

1. Authorizing the person you are naming in the Health Care Power of Attorney to make decisions about life-prolonging measures.
2. Directing your physician to withhold or discontinue life-prolonging measures.
3. Directing your physician to provide you with maximum treatment, including life-prolonging measures.