

## ESTATE PLANNING QUESTIONNAIRE - MARRIED

### **1. Terms and Conditions**

This form was designed to be answered and filled in using Adobe Acrobat Reader 8.0 or higher in order to take advantage of all of the features Adobe offers and to provide you with as much information in an interactive way as possible. The most important feature that Acrobat Reader 8.0 offers is the ability to save the form during and after your filling it out. If you use Acrobat, you understand there is a risk that third parties could intercept the information transmitted via the internet and you accept that risk. In the alternative you have the option of printing this form out on paper and faxing or mailing it to our office. In order to protect your information, you should **NOT** provide your social security numbers, birth dates or any account numbers or names of institutions holding your assets. We do not need or ask you for this information. You also understand that completion of this form and the transmitting of it to the office of Mark D. Freeman, Esq. does not give rise to an attorney client relationship. You should not consider Mr. Freeman your attorney unless and until your representation has been accepted, you have been contacted, receipt of this form has been confirmed and arrangements have been made to pay our fee. Our fee schedule is posted on our website at [www.yourpawill.com/feestplanplan.html](http://www.yourpawill.com/feestplanplan.html). Any information received by Mr. Freeman will be kept confidential.

Both husband and wife are in agreement as to the goal of your estate plan. You both understand that should a conflict arise in the future, that Mark D. Freeman, Esq. cannot represent either of you in resolving that conflict. You understand that whatever information is disclosed to Mr. Freeman by one spouse will be disclosed to the other.

Husband agrees to these terms and conditions.            Yes            No

Wife agrees to these terms and conditions.            Yes            No

**2. A Quick note about filling out this form.** This form should be completed to the best of your ability. If you are using Acrobat Reader 8.0 or higher you can save the form at any point and return to it later to finish filling it out. If you are using a version of Acrobat Reader lower than 8.0 you **WILL NOT** be able to save the form at all. You can only fill out the form and then print it out. You can print out the form as a blank form and then fill it in by hand, however, if you do that you will not have access to the help screens. If you are not sure how to provide the information requested, there are explanations that are visible by placing your cursor over certain fields and there are HELP buttons throughout this form. If these instructions do not fully clarify your questions you can enter a question mark on the form and move on. If you feel you need to speak with Mr. Freeman before you can provide this information you should set up a consultation by calling the office at 610-828-1525.

**3. What you can expect from our office.** Once you have completed this form you should forward it to our office. If you are completing this form using paper you can forward it to our office by fax at 610-828-1769 or by mail to Mark D. Freeman, Esq., 900 Matsonford Rd., Conshohocken, PA 19428. If you choose to complete this form in Adobe Acrobat Reader 8.0 or higher you can save this form and attach it to an email and send it to us at [info@yourpawill.com](mailto:info@yourpawill.com). Whichever way you choose to transmit your information to us, once we receive your completed form we will contact you to confirm that we have received it and will discuss our fee and payment arrangements and we will try, if possible, to set up an appointment right then for you to sign your documents.

**4. BASIC INFORMATION ABOUT YOU AND YOUR CHILDREN**

**a. HUSBAND - NAME and AGE**

AGE	FIRST	MIDDLE	LAST

Are there any other names you are known by or variations in the spelling of your name?

Yes      No

FIRST	MIDDLE	LAST

**b. WIFE - NAME and AGE**

AGE	FIRST	MIDDLE	LAST

Are there any other names you are known by or variations in the spelling of your name?

Yes      No

FIRST	MIDDLE	LAST

**c. CHILDREN**

Do you have any natural or adopted children that are the product of this marriage? (This includes natural and legally adopted children where both of you are listed as the parents on the child's birth certificate.)

Yes      No

List their names, ages, whether they are disabled and whether they have children that would be your grandchildren and if so, how many children they have.

First	Middle	Last	Age	Disabled	Children

Do you have any children that are NOT the product of this marriage? (You should list any children that were born to either spouse or any children that you or your spouse consider as yours and want to include in your estate plan but both of you are not listed as the parents on that child's birth certificate.)

Yes      No

List their names, whether they are minors or disabled and whether they have children that would be your grandchildren and if so, how many children they have.

For each child provide

First	Middle	Last	Age	Disabled	Children

**d. COMMENTS**

Is there anything about your children that we should know such as whether one or more is deceased, has filed for bankruptcy, struggles with substance abuse or anything else that might concern you about them receiving an inheritance from you?

Yes      No

If yes, explain here:

**5. ASSETS, REAL ESTATE, BANK ACCOUNTS, INVESTMENTS AND GIFTS**

OPTION TO NOT DISCLOSE ASSETS. You understand that Mr. Freeman cannot fully advise you about avoiding probate upon the death of the first spouse and about possible federal estate and gift tax consequences without information about your assets, however, you want to get your legal documents done as quickly as possible and do not want to spend the time providing this information. Yes No

If Yes skip to section 6 on page 8.

If No continue below.

**a. RESIDENCE**

Do you own your residence? Yes No

Were you married when you purchased your residence? Yes No

Your Residence

Market Value	Mortgage Owed	How is it titled?	State	County	Municipality

**b. OTHER REAL ESTATE**

Do you own any other real estate such as a separate lot next to your residence or other real property such as a second home, rental property or commercial real estate? Yes No

	Type	Title	Married/ Purchase	Market Value	Mortgage Owed	State	County	Municipality
A								
B								
C								
D								
E								

**c. QUALIFIED RETIREMENT ACCOUNTS**

Does Husband have any qualified accounts? Yes No

	IRS designation	Type of Account	Balance	Beneficiary
A				
B				
C				
D				
E				

Does Wife have any qualified accounts? Yes No

	IRS designation	Type of Account	Balance	Beneficiary
A				
B				
C				
D				
E				

**d. NON-QUALIFIED ACCOUNTS**

Do you have any other bank, investment, mutual fund or other accounts? Yes No

	Type of account	How is it titled	Beneficiary Designations?	Beneficiary	Balance
A					
B					
C					
D					
E					
F					
G					
H					
I					
J					
K					
L					
M					
N					
O					

**e. LIFE INSURANCE**

Does Husband have any life insurance? Yes No

	Type	Death Benefit	Current Cash Value	Beneficiaries
A				
B				
C				
D				

Does Wife have any life insurance? Yes No

	Type	Death Benefit	Current Cash Value	Beneficiaries
A				
B				
C				
D				

**f. BUSINESS INTERESTS:**

Does Husband or Wife own any business interests as a sole proprietor , partner, S-corporation, C-Corporation, LLC or any other business entity?

Yes      No

If yes provide details of any business interests here.

**g. TRUSTS**

Is Husband or Wife the Settlor, Trustor or Beneficiary of any Trust? Yes      No

If yes describe here.

**h. PERSONAL PROPERTY**

Other than ordinary household furnishings and clothing, does Husband or Wife own any items of personal property that have significant value? Yes      No

If yes describe here.

**i. ANY OTHER ASSETS**

Does Husband or Wife own any other asset not listed above? Yes No

	Describe the asset	How is it titled	Value
A			
B			
C			
D			
E			
F			
G			
H			

**j. GIFTS**

Has Husband or Wife ever given more than \$10,000.00 to any individual in any calendar year or filed a United States Gift Tax Return, Form 709?

Yes No

Donor/ Donee	Year	Amount

**6. YOUR WISHES - BEQUESTS AND RESIDUE**

**a. HUSBAND**

Upon Husband's passing – does husband want to leave everything to Wife?

Yes      No

If no explain wishes here:

If Wife is not living upon Husband's passing – does husband want to make any specific bequests to family, friends or charities?

Yes      No

If yes explain wishes here:

If Wife is not living upon Husband's passing - should the rest and residue of the Husband's estate be distributed equally to Husband's children?

Yes      No

If no explain wishes here:



**b. WIFE**

Upon Wife's passing – does Wife want to leave everything to Husband?

Yes      No

If no explain wishes here:

If Husband is not living upon Wife's passing – does Wife want to make any specific bequests to family, friends or charities?

Yes      No

If yes explain wishes here:

If Husband is not living upon Wife's passing - should the rest and residue of the estate be distributed equally to Wife's children?

Yes      No

If no explain wishes here:

**7. CHOICE OF FIDUCIARIES**

**a. EXECUTOR**

HUSBAND

	Name	Relationship
Primary Executor		
Successor #1		
Successor #2		
Successor #3		

WIFE

	Name	Relationship
Primary Executor		
Successor #1		
Successor #2		
Successor #3		

**b. TRUSTEE**

HUSBAND

	Name	Relationship
Primary Trustee		
Successor #1		
Successor #2		
Successor #3		

WIFE

	Name	Relationship
Primary Trustee		
Successor #1		
Successor #2		
Successor #3		

**c. AGENT FOR POWER OF ATTORNEY**

HUSBAND

	Name	Relationship
Primary Agent		
Successor #1		
Successor #2		
Successor #3		



**8. GUARDIAN SELECTION**

Does Husband or Wife have any minor or disabled children for whom you want to name a guardian?

Yes      No

Child's Name	Guardian #1	Guardian #2

Do you have any comments about your Guardian choices?

Yes      No

If yes explain here:

**9. CONTACT INFORMATION**

Tell us what phone number or numbers we can use to contact you so we can confirm our receipt of your information and discuss any questions Mr. Freeman may have about your choices and answers on this form? We will also call you to set up an appointment with you so that you can sign your documents. You should only provide the phone numbers on which you would like us to call you. You can simply leave the other spaces empty if you do not want us to call you on those phone numbers.

	Home	Daytime Number	Cell
Husband			
Wife			

**10. WHAT YOU CAN EXPECT NEXT**

We will be in touch with you within three business days to confirm that we have received your information and to discuss any questions we may have about your answers and choices. It is our goal to have drafts of your legal documents to you for your review within two weeks of our receiving your information. It is our goal to have you sign your legal documents within 30 days or sooner of our receiving your information.

**11. HOW DO YOU WANT TO RECEIVE DRAFTS OF YOUR DOCUMENTS?**

Once we have received your information, we will call you to confirm that we have received them, Mr. Freeman will discuss your wishes with you over the telephone and then draft your will power of attorney and living will. We will then send drafts of your documents to you so that you can review them to make sure the documents accurately reflect your wishes. It is also a good opportunity to make sure names are correctly spelled and to give you the opportunity to see what your legal documents say before you come to the appointment to have you sign them. In this way we have everything properly prepared for your appointment. Your careful review of the drafts of your documents enables your documents to be completed with just one office appointment.

How would you like us to send you drafts of your legal documents?

Email in pdf format. Provide your email address here:

NOTE: Because sending you drafts by email saves paper and postage, we pass that savings on to you and you will receive a \$25.00 credit if you choose to use email for your drafts. Your final signed documents will still be printed on our high quality bond paper.

Regular mail to this address :


## **12. HOW DID YOU HEAR ABOUT US?**

We would appreciate your taking a moment to let us know how you learned about the Law Office of Mark D. Freeman, Esquire and/or [yourpawill.com](http://yourpawill.com). Please tell us or select the choice below which best describes how you heard about us:

## **13. COMMENTS**

Do you have any comments about how we can improve our ability to serve you better, any comments about your estate, any comments about the answers you provided on this form, or do you have any discount or referral codes to let us know about?

Yes                      No

If Yes then provide your comments here:

## **14. HOW YOU CAN SEND US YOUR INFORMATION**

After you have completed this form, you should print it out now and send it to the office of Mark D. Freeman, Esq. one of three ways:

If you filled this form out on paper or, if you filled this form out on Adobe Acrobat Reader and you do not want to, or cannot email your information to our office, you can print the form out and send it:

1. by fax to our fax number **610-828-1769**,
2. by mail to: **Mark D. Freeman, Esq.**  
**900 Matsonford Rd.**  
**Conshohocken, PA 19428**
3. If you filled this form out using Adobe Acrobat Reader 8.0 and want to send your information to us by email:
  - Save this form onto your computer and remember where you saved it. (If you have any version of Adobe Acrobat Reader lower than 8.0 you cannot save this file.)
  - Create an new email addressed to [info@yourpawill.com](mailto:info@yourpawill.com)
  - Attach the file you created when you saved this form to the email.  
(It is easy to forget this step so be sure you attach the file.)
  - Type "Will information" in the subject line
  - Send us your email.