



PRITI NEMANI CONNOR
605 N. MICHIGAN AVE 4TH FLOOR
CHICAGO, IL 60611
O: 312.646.5323
F: 708.545.6433
INFO@NEMANILAW.COM

**YOUR ESTATE PLAN
THOUGHT ORGANIZER
FOR MARRIED CLIENTS**

Tell us about yourselves.

Spouse #1: Tell us about yourself.

Legal Name: _____

Other Names used: _____

What do you want us to call you? _____

Address: _____

County: _____ E-Mail: _____

Telephone: (home) _____ (work) _____ (cell) _____

Preferred Method of Contact (email phone) and Time of day: _____

Date of Birth: _____

US citizen? Yes No. If no, what nationality: _____

Are you attached or unattached? Are you divorced or widowed?

What is most important to you? What are your main priorities in life?

Who do you trust more than anyone else? What if that person is unavailable to act on your behalf?

Are there any causes or interests that you are particularly passionate about?

(Spouse #1 Questionnaire Continued)

How do you wish to be remembered after you pass?

Who do you want to provide for in the event of your passing, generally?

What scares you about planning your estate? What has held you back from taking this step?

What do you do for a living?

How long have you been doing it?

Do you like it?

When do you anticipate retirement?

Tell us about your family.

Are your parents now living? If so, are you close to them?

Do you have any siblings? If so, please tell us about them, including how many, whether you have a close relationship with them and where they live.

Spouse #2

Tell us about yourself.

Legal Name: _____

Other Names used: _____

What do you want us to call you? _____

Address: _____

County: _____ E-Mail: _____

Telephone: (home) _____ (work) _____ (cell) _____

Preferred Method of Contact (email phone) and Time of day: _____

Date of Birth: _____

US citizen? Yes No. If no, what nationality: _____

Are you attached or unattached? Are you divorced or widowed?

What is most important to you? What are your main priorities in life?

Who do you trust more than anyone else? What if that person is unavailable to act on your behalf?

Are there any causes or interests that you are particularly passionate about?

How do you wish to be remembered after you pass?

Who do you want to provide for in the event of your passing, generally?

What scares you about planning your estate? What has held you back from taking this step?

(Spouse #2 Questionnaire Continued)

What do you do for a living?

How long have you been doing it?

Do you like it?

When do you anticipate retirement?

Tell us about your family.

Are your parents now living? If so, are you close to them?

Do you have any siblings? If so, please tell us about them, including how many, whether you have a close relationship with them and where they live.

Together, tell us about your family:

Do you have children? If so, tell us about them. Please list your child by name, age and tell us if there are any extraordinary circumstances relating to any of your children that we should be aware of, such as special needs or substance abuse issues.

Our Children: None **AGE or DOB** **Any special circumstances?**

CHILDREN FROM PRIOR MARRIAGE:

Spouse #1 Spouse #2 AGE

_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____

Would you like to treat all children as if they were the children of this marriage? No Yes

Do you have any grandchildren? _____

Number of grandchildren: _____ Range of Ages: _____

Do you have any deceased children? **If so, please tell us about your child.**

If he or she survived by children? If yes, name(s):

• Any adopted children?

If yes, name: _____

- Do you have any relatives (other than children) who depend on you for all or part of their support?
- Do you think any of your beneficiaries have special problems with spouses, drugs, alcohol or handling money?
- Do you wish to disinherit any of your children, grandchildren or any other close relative?
- Do you have an existing Marital Property Agreement?
- Do either of you expect to inherit substantial assets (\$100,000 +)?
- Do either of you have existing Wills?
- Do either of you have any existing trusts?
- Have you ever filed a Federal Gift Tax Return?

YES **NO**

- Should the surviving spouse have the power to control the distribution of the entire estate after the first death?
- Do you want any assets to pass to your children before the second spouse's death?
- If a beneficiary dies prior to the second spouse's death, do you want the assets to go to that beneficiary's issue?
- Do you want assets passing to your beneficiaries to be held in trust until a specific age or ages?

Who, other than your surviving spouse, do you want to be the decision maker concerning your estate upon your death:

Spouse 1:

Spouse #2:

Who would you want to raise your child that is under 18, if both spouses die (if applicable):

Who, other than the surviving spouse would you want to make any major medical decisions on your behalf:

Spouse 1:

Spouse #2:

In general, state how you want your estate distributed among your beneficiaries after the death of both of you?

Spouse 1:

Spouse #2:

State any specific concerns (not already mentioned) that you have regarding the distribution of your asses:

Spouse 1:

Spouse #2:

Your Burial and/or Final Disposition Wishes

Spouse #1:

At my death, I wish to be: cremated buried.

If cremation, I would like my ashes disposed as follows:

If buried, I would like my remains interred as follows:

I have already made arrangements at:

Spouse #2:

At my death, I wish to be: cremated buried.

If cremation, I would like my ashes disposed as follows:

If buried, I would like my remains interred as follows:

I have already made arrangements at:

Tell us about your assets. Don't be shy. We need to know about your assets to help determine what kind of estate plan is best for you.

Don't know? Use best guess. This can be a "ballpark" or "garage sale" estimate.

ESTIMATED* VALUE OF OUR ASSETS

<u>TYPE OF ASSET:</u>	<u>HUSBAND'S SEP. PROP.</u>	<u>WIFE'S SEP. PROP.</u>	<u>COMMUNITY PROPERTY</u>
• REAL ESTATE: (fair market value, <u>less</u> loans)	\$ _____	\$ _____	\$ _____
• SECURITIES: (stocks, bonds, mutual funds)	\$ _____	\$ _____	\$ _____
• CASH TYPE ASSETS: (cash, annuities, notes due you)	\$ _____	\$ _____	\$ _____
• BUSINESS INTERESTS: (sole proprietorship, partnerships, closely held corporation, etc.)	\$ _____	\$ _____	\$ _____
• RETIREMENT PLANS: (IRA, 401k, etc. †)	\$ _____	\$ _____	\$ _____
• VEHICLES: (autos, R.V., boat)	\$ _____	\$ _____	\$ _____
• PERSONAL PROPERTY: (jewelry, furniture, antiques)	\$ _____	\$ _____	\$ _____
TOTAL:	\$ _____	\$ _____	\$ _____

† Do not show benefits which will terminate at death (e.g., pension, social security, etc.).

Value of Life Insurance policies will be listed separately on the next page.

LIFE INSURANCE

(do not include accidental death policies)

- "Insured" will be "1" for Spouse #1; "2" for Spouse #2; or "S" survivor of both spouses
- "Owner" will be "C" community property; for Spouse #1; "#2" for Spouse #2
- "Cash Value" use best estimate (term policies normally have no cash value)
- "Face Value" is the amount payable at death
- "Beneficiary" will be "1" Spouse #1; "2" for Spouse #2; "C" child, "O" other

INSURED (H/W/S)	OWNER (H/W/C)	CASH VALUE (\$ estimate)	FACE VALUE (\$ paid on death)	BENEFICIARY (H/W/C/O)
_____	_____	\$ _____	\$ _____	_____
_____	_____	\$ _____	\$ _____	_____
_____	_____	\$ _____	\$ _____	_____
_____	_____	\$ _____	\$ _____	_____
_____	_____	\$ _____	\$ _____	_____
_____	_____	\$ _____	\$ _____	_____

WAIVER OF POTENTIAL CONFLICT OF INTEREST

We have each read the foregoing material and understand that there are potential conflicts of interest between myself and my spouse in the matters about which we are consulting you. If either of us desire to have separate counsel or desire you not to be involved at all, that spouse shall notify you. We each hereby consent to having you represent both of us in the drafting of our estate planning documents and we each hereby waive any potential or actual conflicts of interest. We understand that since you will be representing both of us on the same matter, as between ourselves and you, there are no confidential communications.

Dated: _____

Spouse #1 Signature

Spouse #2 Signature