

# WHAT YOU DECIDE & WHAT YOU PROVIDE . . . .

## CONFIDENTIAL PERSONAL DATA

### ESTATE PLANNING QUESTIONNAIRE

Please use n/a to indicate not applicable.

#### GENERAL INFORMATION

##### YOU

**Full name:** \_\_\_\_\_

Any other name(s) used: \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Place of Birth:** \_\_\_\_\_

**Social Security Number:** \_\_\_\_\_

**Are you a United States citizen?**  Yes  No

If no, country of citizenship: \_\_\_\_\_

##### YOUR SPOUSE

**Full name:** \_\_\_\_\_

Any other name(s) used: \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Place of Birth:** \_\_\_\_\_

**Social Security Number:** \_\_\_\_\_

**Are you a United States citizen?**  Yes  No

If no, country of citizenship: \_\_\_\_\_

**Date and Place of Marriage:** \_\_\_\_\_

Location of Marriage Certificate: \_\_\_\_\_

#### ADDRESS AND TELEPHONE INFORMATION:

**Home telephone number:** \_\_\_\_\_

**Business telephone number:**

You: \_\_\_\_\_

Your Spouse: \_\_\_\_\_

**Permanent residence:**

Address: \_\_\_\_\_

\_\_\_\_\_

Own or rent? \_\_\_\_\_

How long have you resided there? \_\_\_\_\_

**Other residence(s):** \_\_\_\_\_

Own or rent? \_\_\_\_\_

**If you have residences in more than one state:**

State in which you are registered to vote: \_\_\_\_\_

When did you first register to vote in that state? \_\_\_\_\_

State in which your car is registered: \_\_\_\_\_

Address used on your federal tax return: \_\_\_\_\_

Address to which your credit card bills are sent: \_\_\_\_\_

\_\_\_\_\_

Names and addresses of clubs and associations to which you belong:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If any of these memberships are on a nonresident basis, please list:

\_\_\_\_\_

\_\_\_\_\_

Describe each home in each state (size of building, land, etc).

Residence 1: \_\_\_\_\_

\_\_\_\_\_

Residence 2: \_\_\_\_\_

**PRIOR MARRIAGE(S)**

**YOU:**

**Name of Former Spouse:** \_\_\_\_\_

**Date and Place of Prior Marriage:** \_\_\_\_\_

If marriage ended by divorce, list date and location of judgment papers:

\_\_\_\_\_

If marriage ended by death, list date and location of death certificate:

\_\_\_\_\_

**YOUR SPOUSE:**

**Name of Former Spouse:** \_\_\_\_\_

**Date and Place of Prior Marriage:** \_\_\_\_\_

If marriage ended by divorce, list date and location of judgment papers:

\_\_\_\_\_

If marriage ended by death, list date and location of death certificate:

\_\_\_\_\_