

ESTATE PLANNING INTERVIEW MARRIED PERSONS

I. PERSONAL INFORMATION

Names: _____

Home Address: _____
Street

City State Zip Code County

HUSBAND

WIFE

Date of Birth: _____ Date of Birth: _____

Social Security Number: _____ Social Security Number: _____

Citizenship: _____ Citizenship: _____

Place of Employment: _____ Place of Employment: _____

Work Address: _____ Work Address: _____

Position: _____ Position: _____

Contact Information Please circle preferred method of communication Contact Information Please circle preferred method of communication

Phone Numbers: Home: _____ Office: _____ Cellular: _____
Phone Numbers: Home: _____ Office: _____ Cellular: _____

Fax Numbers: Home: _____ Office: _____
Fax Numbers: Home: _____ Office: _____

E-mail: Home: _____ Office: _____
E-mail: Home: _____ Office: _____

Prior Marriage? Yes or No Prior Marriage? Yes or No
If Yes: Name of Prior Spouse: _____
Name of Prior Spouse: _____

If marriage ended in divorce, please attach a copy of decree or settlement

If marriage ended in divorce, please attach a copy of decree or settlement

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CHILDREN

Full Name

Date of Birth

Parents (if not both of you)

Name of Child's Spouse

GRANDCHILDREN

Full Name

Date of Birth

Parents

Name of Grandchild's Spouse

Do you intend to name other individuals or charities as beneficiaries of your estates? If so, please describe.

II. SCHEDULE OF ASSETS AND LIABILITIES

A description of your assets and liabilities will help us advise you in developing your overall estate plan. Exact dollar amounts and detailed identification of each specific asset are not required at this stage; valuation by general category is sufficient. If you have a recent financial statement, you may attach it instead. Please use gross values and indicate any liens in liabilities section.

<u>ASSET DESCRIPTION</u>	<u>APPROXIMATE VALUE</u>	<u>OWNERSHIP (H, W or Joint)</u>	<u>DESIGNATED BENEFICIARY</u>
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Primary Residence:

Other Real Property:

Cash Accounts and CDs:

Stocks, Bonds, Mutual Funds, etc:

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Employer Sponsored Retirement Plans:

IRAs:

Business Interests:

Beneficial Interests in Trusts:

Anticipated Inheritance:

Automobiles:

Jewelry, Artwork, and Other:

Furnishings and Other Miscellaneous Tangible Personal Property:

LIABILITY DESCRIPTION

OUTSTANDING BALANCE

Mortgage(s):

Other Obligations:

LIFE INSURANCE

Company: _____	Company: _____	Company: _____
Policy No.: _____	Policy No.: _____	Policy No.: _____
Insured: _____	Insured: _____	Insured: _____
Owner: _____	Owner: _____	Owner: _____
Beneficiary: _____	Beneficiary: _____	Beneficiary: _____
Gross Death Benefit: _____	Gross Death Benefit: _____	Gross Death Benefit: _____
Gross Cash Value: _____	Gross Cash Value: _____	Gross Cash Value: _____
Less Outstanding Loans: _____	Less Outstanding Loans: _____	Less Outstanding Loans: _____
Premium Amount: _____	Premium Amount: _____	Premium Amount: _____
Premium Due Date: _____	Premium Due Date: _____	Premium Due Date: _____

III. SUPPLEMENTAL INFORMATION

Business Interests:

Name of Business: _____

Type of Legal Entity: _____ Ownership Percentage: _____

Do you have a Buy/Sell Agreement? Yes or No (If Yes, please provide a copy)

Do you have a Premarital Agreement? Yes or No (If Yes, please provide a copy)

Do you have existing Wills and/or Trusts? Yes or No (If Yes, please provide copies)

Do any family members have special needs? If so, please describe:

Are you or your children named as beneficiaries of any existing trusts? If so, please describe:

Takers-in-Default:

Please indicate below who you would like to name as contingent beneficiaries of your estates if your spouse, children and grandchildren should all predecease you. These "Takers-in-Default" can include individuals and/or charities. If you do not wish to name any Takers-in-Default, then your estates would pass to beneficiaries identified in accordance with state law.

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IV. FIDUCIARIES

- A. Executor. The Executor is the person responsible for collecting your probate assets, paying all debts, taxes and expenses, and distributing your probate assets in accordance with the terms of your Will.

Please list the name and place of residence of the person who you would like to name as Executor of your Will. In addition, please list the name and place of residence of one or more successor Executors who could serve in the event your first choice is unable to serve. Your Executor generally can be any U.S. resident 18 years of age or older. If you would like, you may name your surviving spouse as Executor of your Will.

Husband's Will

Wife's Will

Executor

Executor

Place of Residence (City and State)

Place of Residence (City and State)

Successor Executor

Successor Executor

Place of Residence (City and State)

Place of Residence (City and State)

Second Successor Executor

Second Successor Executor

Place of Residence (City and State)

Place of Residence (City and State)

- B. Guardian of the Person and Estate. The Guardian of the Person is the person responsible for the care and custody of any minor children upon the death of the surviving parent. The Guardian of the Estate is the person responsible for managing the property of any minor children upon the death of the surviving parent.

Please list the name and place of residence of the person who you would like to serve as Guardian of the Person and Estate of any minor children. In addition, please list the name and place of residence of one or more successor Guardians of the Person and Estate who could serve in the event your first choice is unable to serve. The Guardian of both the Person and Estate generally can be any U.S. resident 18 years of age or older. If you would like, you can name the same person to serve as both Guardian of the Person and Guardian of the Estate for any minor children.

Guardian of the Person

Guardian of the Estate

Place of Residence (City and State)

Place of Residence (City and State)

Successor Guardian of the Person

Successor Guardian of the Estate

Place of Residence (City and State)

Place of Residence (City and State)

Second Successor Guardian of the Person

Second Successor Guardian of the Estate

Place of Residence (City and State)

Place of Residence (City and State)

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- C. Power of Attorney for Property. A power of attorney for property allows you to designate a person to act as your agent to handle your financial affairs in the event of your disability. The agent can be granted broad powers to handle your property affairs, including the power to engage in real estate and stock transactions on your behalf and to handle any of your bank accounts.

Please list the name and address of the person who you would like to designate as your agent for property. Also, please list the name and address of one or more successor agents in the event your first choice is unable to serve. Your property agent can be any person, including your spouse.

Husband's Property Power

Wife's Property Power

Agent

Agent

Address

Address

Successor Agent

Successor Agent

Address

Address

Second Successor Agent

Second Successor Agent

Address

Address

- D. Power of Attorney for Health Care. A power of attorney for health care allows you to designate a person to act as your agent to make health care decisions for you in the event of your disability. The agent's powers would include the ability to make decisions concerning your personal care, medical treatment, hospitalization and health care. The agent's powers also would include carrying out your wishes concerning life-sustaining treatment.

Please list the name and address of the person who you would like to designate as your agent for health care. Also, please list the name and address of one or more successor agents in the event your first choice is unable to serve. Your health care agent can be any person, including your spouse.

Husband's Health Care Power

Wife's Health Care Power

Agent

Agent

Address

Address

Successor Agent

Successor Agent

Address

Address

Second Successor Agent

Second Successor Agent

Address

Address

ADDITIONAL INFORMATION

Please add any further information on this sheet that you believe will help us in advising you.

The information in this interview is furnished with the understanding that it will be relied upon,
and not independently verified by Sugar Felsenthal Grais & Helsinger LLP