

JAMES P. HAROUTUNIAN, ESQ.

ESTATE PLANNING QUESTIONNAIRE

Dear Prospective Client:

I hope you are well. Please take a few minutes to complete this questionnaire. Effective estate planning requires the following information concerning your personal, family and financial situation be assembled. This form will aid you in organizing that information, and communicating it effectively for my review. If insufficient space is provided for any information, please include additional comments or questions on the last page.

As is true in any communication between a lawyer and a client, the information reported here will be held in strictest confidence and released to no one without your prior consent.

Do your best with the questionnaire and feel free to email or call me with questions at james@hlawoffice.com or (978) 671-0711. When complete, return this questionnaire to my office by email, fax, mail or hand delivery. I will review and contact you shortly thereafter. Thank you.

I. FAMILY INFORMATION

Information	You	Spouse
Name		
Email Address		
Home Address		
Social Security #		
Home Phone		
Mobile Phone		
Work Phone		
Occupation		
Date of Birth		
List any Major Health Issues		

CHILDREN BORN FROM MARRIAGE

Child's Name	Address – (Town Only Needed)	Date of Birth

CHILDREN BORN OUTSIDE MARRIAGE OR ADOPTED

Child's Name	Address (Town Only Needed)	List Birth Parent: <i>you or spouse / or date of adoption</i>	Age

DISABLED OR SPECIAL NEEDS CHILDREN?

If so, please list name of child, nature of disability and governmental assistance received

Child's Name	Nature of Disability or Special Needs	Governmental Assistance (current or anticipated)	Age

IF YOU HAVE DISABLED OR SPECIAL NEEDS CHILDREN?

Do you have reason to believe your child will receive and/or be dependant on governmental assistance as an adult?

List Yes / No or Unknown	
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II. CHOOSE THE BENEFICIARIES OF YOUR ESTATE

Begin with the following assumption:

1. *You and your spouse desire to leave 100% of your estate, to each other;*
2. *If your spouse predeceases you, or should you pass away together, your children will receive your estate in equal shares;*
3. *Should a child predecease you, leaving children of their own (your grandchildren), these grandchildren will evenly split the deceased child's share.*

If you desire different beneficiaries, or plan to give a specific item of personal property (i.e.: Jewelry, Collectibles, etc.), please complete below:

Name of Recipient	Address (if not listed previously)	Age (approx.)	List Specific Gift or Desired % of estate to be given

III. CHOOSE YOUR REPRESENTITIVES

EXECUTOR'S ROLE: acts as the manager of your estate when you pass away – settles debts and distributes assets through legal probate process – will be protected from liability or expense for good faith actions in this role.

Executor	For You	For Spouse
First Selection (usually spouse) (list name and address if not spouse)		
Backup Selection – if any (name and address)		

PROXY'S ROLE: should you lack capacity to make medical decisions, (unconscious, coma, etc) your proxy will have such power thereby allowing them to work with your doctors. This form also designates your choice regarding artificial life sustaining treatment.

Health Care Proxy	For You	For Spouse
First Selection (usually spouse) (list name and address if not spouse)		
Backup Selection– if any (name and address)		

IMPORTANT QUESTION: Do you desire prolonged artificial life-sustaining treatment, if you catastrophically lose brain function and have no medically reasonable prospect of regaining brain function or meaningful quality of life?

	For You	For Spouse
Select Yes or No:		

ATTORNEY'S ROLE: should you lack capacity to make financial decisions, (unconscious, coma, etc) the person you name will have such power and can access money in your accounts and work with creditors to keep finances on track.

Power of Attorney	For You	For Spouse
Choose Only One Selection (usually spouse) (list name and address if not spouse)		

GUARDIAN'S ROLE: should you and your spouse pass away, your minor children's guardian will assume responsibility for, and raise your children. When selecting a guardian, consider their age, subsequent marriage, divorce, remarriage or relocation. Also, speak with them to discuss your selection and concerns.

Guardians For minor children	List Name & Town of Guardians
First Selection (do not name your spouse)	
Backup Selection– if any (do not name your spouse)	

IV. FINANCIAL INFORMATION

ASSETS - Please provide a general estimate of the value, rounded to the nearest thousand or so.

Assets	(\$) Owned by You	(\$) Owned by Spouse	(\$) Owned Jointly
Residence			
Other Real Estate			
Bank Accounts			
Investments			
Retirement benefits including IRAs			
Anticipated Inheritance			

DEBTS - Please provide a general estimate of the value, rounded to the nearest thousand or so.

Debts	(\$) Owed by You	(\$) Owed by Spouse	(\$) Owed Jointly
Real Estate Mortgages (estimate loan balances)			
Loans			
Credit Cards			
Other (specify)			

LIFE INSURANCE POLICIES - Please provide a general estimate of the value, rounded to the nearest thousand or so.

Policy Amount (\$)	Company	Named Insured	Named Beneficiary	Successor Beneficiary

ADDITIONAL QUESTIONS OR COMMENTS:

Type Questions or Comments Here: