

Estate Planning

Client Profile

Please complete the following questionnaire
and return it to our office prior to your initial consultation.

You may email or fax the questionnaire to:



ESTATE PLANNING AND ADMINISTRATION
1660 S. Albion St., Suite 1100
Denver, CO 80222
(303) 757-8300
Fax (303) 753-0444
Bounds@evanscase.com

FAMILY INFORMATION

Client One:

Full Legal Name _____

Other Names/ Aliases _____

Home Address _____

City _____ County _____ State _____ Zip _____

Telephone Number _____ E-mail _____

Birth date _____ Marital Status _____

Client Two (Spouse):

Full Legal Name _____

Other Names/ Aliases _____

Home Address _____

City _____ County _____ State _____ Zip _____

Telephone Number _____ E-mail _____

Birth date _____ Marital Status _____

Children (If Applicable)

Full Legal Name _____

Date of Birth _____ Marital Status _____

Spouse's Name (if applicable) _____ Number of Children _____

Full Legal Name _____

Date of Birth _____ Marital Status _____

Spouse's Name (if applicable) _____ Number of Children _____

Full Legal Name _____

Date of Birth _____ Marital Status _____

Spouse's Name (if applicable) _____ Number of Children _____

PARENTS & SIBLINGS

Parents - List Full Legal Name & City, State

Father _____

Mother _____

Siblings - List Full Legal Name & City, State

Sibling #1 _____

Sibling #2 _____

Sibling #3 _____

Sibling #4 _____

ADVISORS

Accountant

Name or Firm _____ Telephone _____

Email _____

Financial Planner

Name or Firm _____ Telephone _____

Email _____

FIDUCIARIES

Agent for Financial Matters (Client 1)

Name _____ Telephone _____

Relationship _____ City _____ State _____

Agent for Financial Matters (Client 2)

Name _____ Telephone _____

Relationship _____ City _____ State _____

Backup Agent for Financial Matters (Client 1)

Name _____ Telephone _____

Relationship _____ City _____ State _____

Backup Agent for Financial Matters (Client 2)

Name _____ Telephone _____

Relationship _____ City _____ State _____

Personal Representative/Executor (Client 1)

Name _____ Telephone _____

Relationship _____ City _____ State _____

Backup Personal Representative/Executor (Client 1)

Name _____ Telephone _____

Relationship _____ City _____ State _____

Relationship _____ City _____ State _____

Personal Representative/Executor (Client 2)

Name _____ Telephone _____

Relationship _____ City _____ State _____

Backup Personal Representative/Executor (Client 2)

Name _____ Telephone _____

Relationship _____ City _____ State _____

Trustee (Client 1)

Name _____ Telephone _____

Relationship _____ City _____ State _____

Trustee (Client 2)

Name _____ Telephone _____

Relationship _____ City _____ State _____

Backup Trustee (Client 1)

Name _____ Telephone _____

Relationship _____ City _____ State _____

Backup Trustee (Client 2)

Name _____ Telephone _____

Relationship _____ City _____ State _____

**INFORMATION CONCERNING
ESTATE PLANNING GOALS & OBJECTIVES**

Please check "YES" or "NO" for your answer to applicable questions.	YES	NO
Have you completed previous wills, trusts, powers of attorney or living wills? (Please furnish copies of these documents)		
Are you a beneficiary of another person's estate plan?		
If married, have you and your spouse ever signed a pre-marriage or post-marriage agreement? (Please furnish a copy)		
Have you been divorced?		
Are you making payments pursuant to a divorce or property settlement agreement?		
Are you receiving social security, disability payments, or other governmental benefits?		
Are there any persons other than minor children who are dependent on you?		
Do you have a child or other beneficiary with special needs or who receives governmental support or benefits due to a disability?		
Are you and your spouse (if applicable) United States citizens?		

Please describe any other goals and objectives, or provide any other information not mentioned previously that might affect your estate plan:

ASSET SUMMARY AND FINANCIAL INFORMATION

REAL PROPERTY

<u>ADDRESS</u>	<u>OWNER</u>	<u>VALUE</u>

BANK ACCOUNTS

<u>BANK/FINANCIAL INSTITUTION</u>	<u>TYPE</u>	<u>OWNER</u>	<u>VALUE</u>

INVESTMENTS

<u>FINANCIAL INSTITUTION</u>	<u>TYPE</u>	<u>OWNER</u>	<u>VALUE</u>

RETIREMENT ACCOUNTS

<u>FINANCIAL INSTITUTION</u>	<u>TYPE</u>	<u>OWNER</u>	<u>VALUE</u>

LIFE INSURANCE

<u>COMPANY</u>	<u>OWNER</u>	<u>BENEFICIARY</u>	<u>VALUE</u>

BUSINESSES INTERESTS

<u>COMPANY</u>	<u>TYPE</u>	<u>% OWNERSHIP</u>	<u>VALUE</u>

OIL & GAS, MINERAL OR WATER INTERESTS

<u>TYPE</u>	<u>ADDRESS</u>	<u>OWNER</u>	<u>VALUE</u>

VEHICLES

<u>MAKE</u>	<u>MODEL/DESCRIPTION</u>	<u>OWNER</u>	<u>VALUE</u>

MISCELLANEOUS AND OTHER ASSETS

<u>TYPE</u>	<u>DESCRIPTION</u>	<u>OWNER</u>	<u>VALUE</u>