

LAW OFFICE

INTAKE SHEET

ESTATE PLANNING

Date: \_\_\_\_\_ Referred By: \_\_\_\_\_

Prospect Name: \_\_\_\_\_

Co-Prospect Name: \_\_\_\_\_

Street: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Prospect Home Phone: \_\_\_\_\_

Prospect Work Phone: \_\_\_\_\_

Prospect Cell Phone: \_\_\_\_\_

Prospect E-Mail: \_\_\_\_\_

Co-Prospect Home Phone: \_\_\_\_\_

Co-Prospect Work Phone: \_\_\_\_\_

Co-Prospect Cell Phone: \_\_\_\_\_

Co-Prospect E-Mail: \_\_\_\_\_

Are you Married:  Yes  No If married, are you living together:  Yes  No

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Any prior marriages:  Yes  No If so, whose marriage (you or your spouse) and how was it concluded:

How many children from this marriage: \_\_\_\_\_ Any minors?  Yes  No

How many children does the husband have from outside this marriage: \_\_\_\_\_

Any minors?  Yes  No

How many children does the wife have from outside this marriage: \_\_\_\_\_

Any minors?  Yes  No

Are there any individuals you wish to specifically exclude from your estate planning:

Yes  No

Do either of you own a business:  No  Yes If so, please describe: \_\_\_\_\_

Do you own a home:  No  Yes If so, how much equity does it have: \_\_\_\_\_

Do you have any other homes:  No  Yes If so, please describe: \_\_\_\_\_

How many vehicles do you have: \_\_\_\_\_

Please describe any other significant assets: \_\_\_\_\_

Any specific questions or concerns you may have regarding estate planning you wish to ensure we go over with you: \_\_\_\_\_

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	ASSESSMENT AREAS	YES	NO	N/A
1.	I am confident that my (and my spouse's) retirement funds will be adequate, even if we live very long lives			
2.	In the event of a prolonged disability, I have an alternate source of income to pay my mortgage and other financial obligations			
3.	I have sufficient life insurance protection to maintain our family's current lifestyle after my death?			
4.	I am maximizing my savings within my employer's tax-favored retirement plan?			
5.	I currently have a satisfactory, systematic savings plan?			
6.	I am satisfied with my current investment strategy and the tax efficiency of my investments?			
7.	I have had my automobile and home insurance reviewed annually ensure appropriate coverage?			
8.	I have had my business contracts and records reviewed annually to ensure compliance?			
9.	I have a current estate planning package in place and only wish to have modifications to it?			

**OFFICE USE ONLY**

Retainer:  H  C  C7  C13  CR  EP  FF  WC  Other \_\_\_\_\_  PPL

Case Information Sheet:  BK  BK LIT  CIV LIT  EP  EMP  WC  PI-GEN  PI-MV

Other Forms:  CIS  COI  CA  NCA

523 Issues: \_\_\_\_\_  Delay in Filing: \_\_\_\_\_ BE Name: \_\_\_\_\_

Key Issues: \_\_\_\_\_

\_\_\_\_\_

SOL: \_\_\_\_\_ Misc Deadlines: \_\_\_\_\_