JONES LAW OFFICE

CONFIDENTIAL
PERSONAL AND FINANCIAL DATA
TO ASSIST IN WEALTH PRESERVATION
AND
ESTATE PLANNING

CONFIDENTIALITY NOTICE

The information herein provided to JONES LAW OFFICE is submitted for the purpose of facilitating the rendition of professional legal services. The following information is protected from disclosure pursuant to the provisions of *Okla. Stat. tit.* 12, ' 2502 (2002) and Rule 1.6 of the Rules of Professional Conduct as adopted by the Supreme Court of the State of Oklahoma

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CLIENT ESTATE PLANNING DATA SHEET

DATE__________________ REFERRED BY ____

NAME_______________________________________ BIRTHDATE _____________________
(Please print your full legal name.)

SPOUSE____________________________________ BIRTHDATE _____________________
(Please print their full legal name.)

HOME ADDRESS ____

CITY __________________________________ STATE_____________ ZIP_____________

HOME TELEPHONE (___) ____________ COUNTY______________________________

E-MAIL(S) ____

WORK PLACE – **HIS** ____

ADDRESS ____

WORK TELEPHONE (   ) ____________ E-MAIL(S)____________________________

WORK PLACE-**HERS** ____

ADDRESS ____

WORK TELEPHONE (___) ____________ E-MAIL(S)____________________________

SOCIAL SECURITY #: YOU____________________ __SPOUSE____________________

MARITAL STATUS: [ ] MARRIED [ ]SINGLE [ ] WIDOW(ER) [ ] DIVORCED

UNITED STATES CITIZEN: YOU: [ ] YES [ ] NO; SPOUSE [ ] YES [ ] NO

SERVICES DESIRED: [ ] ESTATE PLANNING [ ] BUSINESS PLANNING

[ ] OTHER

____

____

____

____

ESTATE PLANNING DATA SHEET

PLEASE BRING TO THE FIRST CONFERENCE COPIES OF AS MANY OF THE FOLLOWING DOCUMENTS AS ARE APPLICABLE TO YOU:

[ ] Existing Wills or Trust Agreements;
[ ] Life Insurance Policies;
[ ] Divorce Decrees and Property Settlement Agreements;
[ ] Deeds and Lease Agreements for Real Estate;
[ ] Employee Benefit and Retirement Plans;
[ ] Corporation Documents and Shareholder Agreements;
[ ] Partnership Agreements;
[ ] Deeds of Trust and Notes for Money Owed to You;
[ ] Pre-nuptual or post-nuptual Agreements;

If your Estate might be worth over 2 million dollars at your death
[ ] Last Year's Income Tax Returns;
[ ] Gift Tax Returns;

[ ] Any Other Information **That Might Be Important**.

II. CHILDREN:
1. NAME ____ AGE ___________

ADDRESS ____

TELEPHONE NO.S ____

E-MAIL(S) ____

CHILD'S SPOUSE _____________________________________ AGE ____________

CHILDREN? [ ]YES [ ] NO IF SO, AGES__________________________________

2. NAME ____ AGE ___________

ADDRESS ____

TELEPHONE NO.S ____

E-MAIL(S) ____

CHILD'S SPOUSE _____________________________________ AGE ____________

CHILDREN? [ ] YES [ ] NO IF SO, AGES_______________________________________

3. NAME ____ **AGE** _____________

ADDRESS ____

TELEPHONE NO.S ____

E-MAIL(S) ____

CHILD'S SPOUSE ____ AGE ______________

CHILDREN? [ ]YES [ ] NO IF SO, AGES_______________________________________

4. NAME ____ **AGE** _____________

ADDRESS ____

TELEPHONE NO.S ____

E-MAIL(S) ____

CHILD'S SPOUSE ____ AGE ______________

CHILDREN? [ ]YES [ ] NO IF SO, AGES_______________________________________

5. NAME ____ **AGE** _____________

ADDRESS ____

TELEPHONE NO.S ____

E-MAIL(S) ____

CHILD'S SPOUSE ____ AGE ______________

CHILDREN? [ ]YES [ ] NO IF SO, AGES_______________________________________

6. NAME ____ **AGE** _____________

ADDRESS ____

TELEPHONE NO.S ____

E-MAIL(S) ____

CHILD'S SPOUSE ____ AGE ______________

CHILDREN? [ ]YES [ ] NO IF SO, AGES____________________________________

7. NAME **____** **AGE ____________**

ADDRESS ____

TELEPHONE NO.S ____

E-MAIL(S) ____

CHILD'S SPOUSE _______________________________________ AGE _____________

CHILDREN? [ ] YES [ ] NO IF SO, AGES____________________________________

III. KEY PEOPLE IN YOUR ESTATE PLAN:

A. TRUSTEES OF TRUSTS**:** **PLEASE PROVIDE FULL LEGAL NAMES**

HUSBAND

ORIGINAL _____ Spouse [ ] Other ____

1ST SUCCESSOR ____

2ND SUCCESSOR ____

3RD SUCCESSOR ____

WIFE

ORIGINAL _____ Spouse [ ] Other ____

1ST SUCCESSOR ____

2ND SUCCESSOR ____

3RD SUCCESSOR ____

B. EXECUTORS OF WILLS (if different than Trustees above):

HUSBAND

FIRST ________ Spouse [ ] Other ____

SECOND ____

THIRD ____

FOURTH ____

WIFE

FIRST ________ Spouse [ ] Other ____

SECOND ____

THIRD ____

FOURTH ____

C. FINANCIAL POWER OF ATTORNEY (if different than Trustees above):

HUSBAND

FIRST ________ Spouse [ ] Other ____

SECOND ____

THIRD ____

FOURTH ____

WIFE

FIRST ________ Spouse [ ] Other ____

SECOND ____

THIRD ____

FOURTH ____

D. **GUARDIANS** FOR MINOR CHILDREN:

FIRST ____

SECOND ____

THIRD ____

FOURTH ____

E. **HEALTH CARE POWER OF ATTORNEY & ADVANCED DIRECTIVE (Living Will):**

ORIGINAL ____Spouse(s) [ ] Other ____

HUSBAND:

1ST SUCCESSOR ____

2ND SUCCESSOR ____

WIFE:

1ST SUCCESSOR ____

2ND SUCCESSOR ____

E. **GUARDIAN OR CONSERVATOR FOR YOURSELF AND SPOUSE :**

ORIGINAL ____Spouse(s) [ ] Other ________________________________

HUSBAND:

1ST SUCCESSOR ____

2ND SUCCESSOR ____

WIFE:

1ST SUCCESSOR ____

2ND SUCCESSOR ____

IV. INVENTORY OF ASSETS (PLEASE COMPLETE WITH FULL INFORMATION):

***TITLE:** **J-JO1NT** TENANCY WITH SURVIVORSHIP **H**-HUSBAND **W**-WIFE
S-SELF **TC**-TENANTS IN COMMON **C**-COMMUNITY PROPERTY

****PROPERTY DESCRIPTION:** **VR**-VACANT RESIDENTIAL **CD**-CONDOM1NIUM
(**PD**) **VC**-VACANT COMMERCIAL **TH**-TOWNHOUSE
IR-IMPROVED RESIDENTIAL **TS**-TIMESHARE
IC-IMPROVED COMMERCIAL **CO**-CO-OWNERSHIP

	STATE	*TITLE	MARKET VALUE	DEBTS
RESIDENCE				

OTHER REAL ESTATE, MINERAL INTEREST, OR INTEREST :

ADDRESS OF PROPERTY	TITLE*	MARKET VALUE	DEBTS	PD**	LEGAL DESCRIPTION

	ITEM(S)	TITLE*	VALUE
PERSONAL PROPERTY			
VEHICLES			
CHECKING ACCOUNTS			
SAVINGS ACCOUNTS			
STOCKS & BONDS			

T-BILLS, CDS

MUTUAL FUNDS

NOTES TO YOU

OTHER

RETIREMENT PLANS: INCLUDES IRAs, KEOGHs, PENSION & PROFIT SHARING PLANS

OWNER	TYPE	DEATH BENEFICIARY	DEATH VALUE

LIFE INSURANCE: TYPE: **T**-TERM **WL**-WHOLE LIFE **G**-GROUP TERM

OWNER	*TYPE	INSURED BENEFICIARY	FACE VALUE	CASH VALUE

<u>BUSINESSES</u> (Please give complete information):

TYPE: **C**-CORPORATION **S**-S CORPORATION **SP**-SOLE PROPRIETORSHIP
P-PARTNERSHIP **PC**-PROFESSIONAL CORPORATION

#1. NAME OF BUSINESS: ____

WHAT DOES BUSINESS DO?____

***TYPE** **SHAREHOLDERS/PARTNERS** **OWNERSHIP VALUE**

WHO WILL CONTINUE THE BUSINESS UPON RETIREMENT OR DEATH?

DO YOU HAVE BUY-SELL AGREEMENTS FOR THE BUSINESS? ____________________

DO YOU HAVE KEY-MAN AND/OR DISABILITY INSURANCE? _____________________

#2. NAME OF BUSINESS: ____

WHAT DOES BUSINESS DO?____

*TYPE	SHAREHOLDERS/PARTNERS	OWNERSHIP VALUE

WHO WILL CONTINUE THE BUSINESS UPON RETIREMENT OR DEATH?

____

DO YOU HAVE BUY-SELL AGREEMENTS FOR THE BUSINESS? ________________

DO YOU HAVE KEY-MAN AND/OR DISABILITY INSURANCE? _________________

INTERESTS IN TRUSTS: (WHERE YOU ARE NAMED AS A BENEFICIARY)

NAME OF TRUST	INTEREST HELD	VALUE	WHEN TO RECEIVE

TOTALS FOR ESTATE:

	MARKET VALUE	DEBTS
BUSINESSES:	____________________	____________
INTERESTS IN TRUST:	____________________	____________

LIFE INSURANCE: ______________________ ____________

RETIREMENT PLANS: ______________________ ____________

ALL OTHER: ______________________ ____________

GROSS ESTATE: ______________________

LESS DEBTS: ____________

NET ESTATE VALUE ______________________

V. DISTRIBUTIONS: WHERE YOUR ASSETS ARE TO GO AFTER DEATH:

A. UPON FIRST DEATH, I WANT ASSETS TO BE DISTRIBUTED AS FOLLOWS:

HUSBAND

SPECIFIC ASSETS **PERCENTAGE**

TO MY SPOUSE: ____

____

____

____

Distribution to spouse : Outright Life Estate
Credit Shelter Trust w/ QTIP Credit shelter Trust w/o QTIP
One Distribution Two Distributions

TO OTHERS:

NAME **SPECIFIC ASSETS** **PERCENTAGE**

____

____

____

____

____

____

WIFE

	SPECIFIC ASSETS	**PERCENTAGE**

TO MY SPOUSE: ______________________________

____

____

____

Distribution to spouse :

Outright
Credit Shelter Trust w/ QTIP
One Distribution
Life Estate
Credit shelter Trust w/o QTIP
Two Distributions

TO OTHERS:

NAME	**SPECIFIC ASSETS**	**PERCENTAGE**

[ ] INTO TRUST FOR CHILDREN (COMPLETE "C" BELOW)

B. UPON THE SURVIVING SPOUSE'S DEATH, THE ASSETS ARE TO BE DISTRIBUTED AS FOLLOWS:

NAME	**SPECIFIC ASSETS**	**PERCENTAGE**

____

____

____

[ ] INTO TRUST FOR CHILDREN (COMPLETE "C" BELOW)

C. TRUST DISTRIBUTIONS FOR CHILDREN:

1. AGES & PERCENTAGES: _________% at ________________YEARS
_________% at ________________YEARS
_________% at ________________YEARS

2. SPECIAL PROVISIONS:
____
____
____

VI. BACKGROUND INFORMATION: (VERY IMPORTANT, PLEASE COMPLETE)

A. DID EITHER YOU OR YOUR SPOUSE HAVE ANY PREVIOUS MARRIAGES:
[ ] YES [ ] NO
IF YES, PLEASE LIST FOR EACH ONE:
I. PARTICULARS

FORMER SPOUSE'S NAME: ____

DATE & PLACE OF MARRIAGE: _______________________________________

HOW TERMINATED: ____

II. DIVORCE OBLIGATIONS (PAY/RECEIVE):

CHILD SUPPORT: _______________________________

ALIMONY: _______________________________

LIFE INSURANCE: _______________________________

OTHER TERMS: _______________________________

III. CHILDREN FROM THIS MARRIAGE? [ ]YES [ ] NO

IF YES, WHICH CHILDREN:

____

____

B. ARE THERE SPECIAL NEEDS FOR ANY CHILD? [I YES [ ] NO

IF YES, PLEASE EXPLAIN: ____

____

____

C. DO YOU SUPPORT OR EXPECT TO SUPPORT ANYONE ELSE SUCH AS A PARENT OR OTHER PERSON? ~ [ ] YES [ ] NO

IF YES, PLEASE EXPLAIN: ____

____

____

D. MILITARY SERVICE: (BRANCH, RANK, SERIAL #, DATES): __________________

____

E. DESCRIBE ANY SIGNIFICANT HEALTH PROBLEMS FOR EITHER YOU OR YOUR SPOUSE:

____

____

____

F. NAME(S) & ADDRESS(ES) OF PHYSICIAN(S): ______________________________

____

____

G. HAVE YOU EVER LIVED IN A COMMUNITY PROPERTY STATE? (AZ, CA, TX, ID, LA, NM, NV, WA& WI) [ ] YES [ ] NO

IF YES, PLEASE TELL WHERE AND WHEN: ____________________________

____

H. ARE ANY CHILDREN OR GRANDCHILDREN ADOPTED? [ ] YES [ ] NO
IF YES, WHICH ONES: ____________________

K. PREVIOUS RESIDENCES: (STATES) ____________________

L. ANY NAME CHANGES: [ ] YES [ ] NO
M. ANY GIFTS MADE PRIOR TO 1982
IN EXCESS OF $3,000? [ ] YES [ ] NO
AFTER 1982 IN EXCESS OF $10,000? [ ] YES [ ] NO
N. FORGIVE ANY LOANS AT DEATH? [ ] YES [ ] NO
0. SPECIFIC INSTRUCTIONS FOR BURIAL? [ ] YES [ ] NO
P. ANTICIPATE INHERITANCES FROM OTHERS? [ ] YES [ ] NO
Q. ANY RECENTLY INHERITED ASSETS? [ ] YES [ ] NO
R. ANY PRE-NUPTIAL AGREEMENTS? [ ] YES [ ] NO

VII. PARENTS:

NAME	ADDRESS	PHONE

VIII. ADVISORS:

	NAME	ADDRESS	PHONE
A. ACCOUNTANT:			
B. ATTORNEY:			
C. STOCKBROKER:			

D. FINANCIAL ____

PLANNER: ____

E. LIFE INSURANCE ____

AGENT: ____

F. OTHER ADVISORS: ____

____

IX. COMMENTS: