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**CONFIDENTIAL ESTATE PLANNING QUESTIONNAIRE  
FOR A MARRIED COUPLE**

Date: \_\_\_\_\_

Please print or write legibly the following information. If you need more space, use another sheet. If you are not certain about an answer, leave the space blank. Please bring this questionnaire with you, or mail it to me. Please bring to our appointment, copies of relevant deeds, insurance policies, divorce/dissolution judgments, marital agreements, etc.

Home address: \_\_\_\_\_

Telephone Nos.: Home \_\_\_\_\_ Husband Cell \_\_\_\_\_ Wife Cell \_\_\_\_\_

**INFORMATION ON HUSBAND**

Full Legal Name (first, middle, last): \_\_\_\_\_

Name as you prefer to sign: \_\_\_\_\_

Other Names Used: \_\_\_\_\_

Business name, address and telephone: \_\_\_\_\_

Date and place of birth: \_\_\_\_\_

Social security number: \_\_\_\_\_

Are you a U.S. citizen? Yes \_\_\_ No \_\_\_ If no, what nationality? \_\_\_\_\_

Date you came to California: \_\_\_\_\_

Date and Place of Marriage: \_\_\_\_\_

**Children of this marriage:**

(Child 1) Full name: \_\_\_\_\_ DOB: \_\_\_\_\_ Tel: \_\_\_\_\_

Address: \_\_\_\_\_

(Child 2) Full name: \_\_\_\_\_ DOB: \_\_\_\_\_ Tel: \_\_\_\_\_

Address: \_\_\_\_\_

(Child 3) Full name: \_\_\_\_\_ DOB: \_\_\_\_\_ Tel: \_\_\_\_\_

Address: \_\_\_\_\_

**Husband's children of prior marriages:**

(Child 1) Full name: \_\_\_\_\_ DOB: \_\_\_\_\_ Tel: \_\_\_\_\_

Address: \_\_\_\_\_

(Child 2) Full name: \_\_\_\_\_ DOB: \_\_\_\_\_ Tel: \_\_\_\_\_

Address: \_\_\_\_\_

(Child 3) Full name: \_\_\_\_\_ DOB: \_\_\_\_\_ Tel: \_\_\_\_\_

Address: \_\_\_\_\_

**If you have any deceased children, please list below:**

| <u>Name</u> | <u>Date of Death</u> | <u>Names of deceased child's children</u> |
|-------------|----------------------|---|
|-------------|----------------------|---|

|       |       |       |
|-------|-------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |

**Names and address of parents (if living):**

\_\_\_\_\_  
\_\_\_\_\_

**Do you have any support obligation to your parents?** \_\_\_\_\_

**Names and addresses of brothers and sisters (if living):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**List amount of any gifts or inheritances you expect to receive from parents and others, describing from whom and approximate amount:**

\_\_\_\_\_  
\_\_\_\_\_

**Describe any beneficial interests you have in a trust established by some other person; describe any powers you have to designate who receives irrevocable trust property at your death:**

\_\_\_\_\_  
\_\_\_\_\_

**If you are a custodian of property (under the California Uniform Transfers and Minors Act or otherwise), or a trustee of property for the benefit of your children or others, please describe:**

\_\_\_\_\_  
\_\_\_\_\_

**List any gift tax returns you have filed:**

| <u>Year</u> | <u>Amount of Exemption used</u> |
|-------------|---------------------------------|
| _____       | _____                           |
| _____       | _____                           |
| _____       | _____                           |

**INFORMATION ON WIFE**

Full Legal Name (first, middle, last): \_\_\_\_\_

Name as you prefer to sign: \_\_\_\_\_

Other Names Used: \_\_\_\_\_

Business name, address and telephone: \_\_\_\_\_

Date and place of birth: \_\_\_\_\_

Social security number: \_\_\_\_\_

Are you a U.S. citizen? Yes \_\_\_ No \_\_\_ If no, what nationality? \_\_\_\_\_

Date you came to California: \_\_\_\_\_

Date and Place of Marriage: \_\_\_\_\_

**Wife's children of prior marriages:**

(Child 1) Full name: \_\_\_\_\_ DOB: \_\_\_\_\_ Tel: \_\_\_\_\_

Address: \_\_\_\_\_

(Child 2) Full name: \_\_\_\_\_ DOB: \_\_\_\_\_ Tel: \_\_\_\_\_

Address: \_\_\_\_\_

(Child 3) Full name: \_\_\_\_\_ DOB: \_\_\_\_\_ Tel: \_\_\_\_\_

Address: \_\_\_\_\_

**If you have any deceased children, please list below:**

| <u>Name</u> | <u>Date of Death</u> | <u>Names of deceased child's children</u> |
|-------------|----------------------|---|
| _____       | _____                | _____                                     |
| _____       | _____                | _____                                     |

**Names and address of parents (if living):**

\_\_\_\_\_  
\_\_\_\_\_

Do you have any support obligation to your parents? \_\_\_\_\_

**Names and addresses of brothers and sisters (if living):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**List amount of any gifts or inheritances you expect to receive from parents and others, describing from whom and approximate amount:**

\_\_\_\_\_  
\_\_\_\_\_

**Describe any beneficial interests you have in a trust established by some other person; describe any powers you have to designate who receives irrevocable trust property at your death:**

\_\_\_\_\_



**Confidential Asset List**

As of \_\_\_\_\_ (Date)

1. **Real estate:** For each parcel, please list:

| Property address<br>Lender name & address<br>Loan number | Property type  | Fair Market<br>Value | Loan amount | Record title   |
|--|--|----------------------|-------------|--|
| <b>EXAMPLE:</b>  |  |                      |             |  |
| 123 Main Street, Orange, CA<br>Loan Number: #66-123-4567 | personal residence?<br><br>rental?<br><br>Business Property? | \$350,000            | \$150,000   | joint tenancy?<br><br>community<br>property?<br><br>other? |
| _____  | _____  | _____                | _____       | _____  |
| _____  | _____  | _____                | _____       | _____  |
| _____  | _____  | _____                | _____       | _____  |
| _____  | _____  | _____                | _____       | _____  |
| _____  | _____  | _____                | _____       | _____  |
| _____  | _____  | _____                | _____       | _____  |
| _____  | _____  | _____                | _____       | _____  |
| _____  | _____  | _____                | _____       | _____  |
| _____  | _____  | _____                | _____       | _____  |

2. **Promissory notes owed to you**

| Name of person who owes you \$ | Secured?<br>(Yes or No) | Amount owed to you | How is title held? |
|--------------------------------|-------------------------|--------------------|--------------------|
| _____                          | _____                   | _____              | _____              |
| _____                          | _____                   | _____              | _____              |
| _____                          | _____                   | _____              | _____              |
| _____                          | _____                   | _____              | _____              |

3. **Publicly Traded Securities** (stocks, bonds, mutual funds)

| Name of corporation or partnership | Value | Loans outstanding | How is title held? |
|------------------------------------|-------|-------------------|--------------------|
|                                    |       |                   |                    |
|                                    |       |                   |                    |
|                                    |       |                   |                    |
|                                    |       |                   |                    |
|                                    |       |                   |                    |
|                                    |       |                   |                    |

4. **Private (closely held) business interests** (partnerships, LLC's, sole proprietorships)

| Name of entity | Value of your interest | Is there a buy-sell agreement? | How is title held? |
|----------------|------------------------|--------------------------------|--------------------|
|                |                        |                                |                    |
|                |                        |                                |                    |
|                |                        |                                |                    |
|                |                        |                                |                    |
|                |                        |                                |                    |
|                |                        |                                |                    |
|                |                        |                                |                    |

5. **Employee Benefits** (pension plan, profit sharing plan, IRA, 401(k), 403(b), etc.)

| Employer | Type of plan (Pension/Profit Sharing/IRA/401K) | Name of employee | Name of beneficiary | Present value |
|----------|--|------------------|---------------------|---------------|
|          |  |                  |                     |               |
|          |  |                  |                     |               |
|          |  |                  |                     |               |
|          |  |                  |                     |               |
|          |  |                  |                     |               |

6. **Cash/cash equivalents** (checking accounts; certificates of deposit, money market accounts, etc.)

| Name of institution | Type of account | How is title held? | Amount |
|---------------------|-----------------|--------------------|--------|
|                     |                 |                    |        |
|                     |                 |                    |        |
|                     |                 |                    |        |
|                     |                 |                    |        |
|                     |                 |                    |        |
|                     |                 |                    |        |

7. **Automobiles, boats and other vehicles**

| Year | Make | Present value | Loans owed | How is title held? |
|------|------|---------------|------------|--------------------|
|      |      |               |            |                    |
|      |      |               |            |                    |
|      |      |               |            |                    |
|      |      |               |            |                    |
|      |      |               |            |                    |

8. **Furniture, furnishings, jewelry collections, etc.**

| General description | Value |
|---------------------|-------|
|                     |       |
|                     |       |
|                     |       |
|                     |       |
|                     |       |
|                     |       |
|                     |       |

9. **Life insurance policies**

| Name of company | Policy number | Name of insured | Name of owner | Name of beneficiary | Face value | Loans owed |
|-----------------|---------------|-----------------|---------------|---------------------|------------|------------|
|                 |               |                 |               |                     |            |            |
|                 |               |                 |               |                     |            |            |
|                 |               |                 |               |                     |            |            |
|                 |               |                 |               |                     |            |            |
|                 |               |                 |               |                     |            |            |

10. **Other assets**

| Description | Value |
|-------------|-------|
|             |       |
|             |       |
|             |       |
|             |       |
|             |       |
|             |       |
|             |       |
|             |       |

