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CONFIDENTIAL ESTATE PLANNING QUESTIONNAIRE
FOR A MARRIED COUPLE - OPPOSITE GENDERS

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> |
|-------------|----------------------|---|
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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> |
|-------------|---------------------------------|
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MISCELLANEOUS INFORMATION.

a. Have you signed a premarital or other property agreement? Yes ___ No ___
If yes, please bring it with you to our appointment.

b. If you have a safe deposit box, give name and address of bank and persons who have access: _____

c. Have you signed a buy/sell agreement concerning any business interests?
Yes ___ No ___ If yes, please bring it with you to our appointment.

d. If you have a Will and/or Trust presently in existence, please send them to Mr. Vollmer or bring them with you to our appointment.

Use space below to include information that does not fit in the previous portion of this Questionnaire.

Confidential Asset List

As of _____ (Date)

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

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

2. **Promissory notes owed to you**

| Name of person who owes you \$ | Secured? (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? |
|------------------------------------|-------|-------------------|--------------------|
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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? |
|----------------|------------------------|--------------------------------|--------------------|
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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 |
|----------|--|------------------|---------------------|---------------|
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6. **Cash/cash equivalents** (checking accounts; certificates of deposit, money market accounts, etc.)

| Name of institution | Type of account | How is title held? | Amount |
|---------------------|-----------------|--------------------|--------|
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7. **Automobiles, boats and other vehicles**

| Year | Make | Present value | Loans owed | How is title held? |
|------|------|---------------|------------|--------------------|
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8. **Furniture, furnishings, jewelry collections, etc.**

| General description | Value |
|---------------------|-------|
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9. **Life insurance policies**

| Name of company | Policy number | Name of insured | Name of owner | Name of beneficiary | Face value | Loans owed |
|-----------------|---------------|-----------------|---------------|---------------------|------------|------------|
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10. **Other assets**

| Description | Value |
|-------------|-------|
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11. **Liabilities not shown above**

| Description | Amount owed |
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