

Client Information Sheet – Estate Planning

Please complete this form as fully as possible. Where asked for names, put the full first, middle, and last names, if known.

Husband's Information

Name: _____ Please call me: _____

Address: _____ Employer: _____

_____ Employer address: _____

Birth Date: _____ Previously Married: _____ Children from previous marriage: _____

Birth city/state: _____ Social Security No.: _____ Driver's Lic. No.: _____

Home ph: _____ Work ph: _____ Fax: _____

Cell: _____ Email: _____ Occupation: _____

Wife's Information

Name: _____ Please call me: _____

Address: _____ Employer: _____

_____ Employer address: _____

Birth Date: _____ Previously Married: _____ Children from previous marriage: _____

Birth city/state: _____ Social Security No.: _____ Driver's Lic. No.: _____

Home ph: _____ Work ph: _____ Fax: _____

Cell: _____ Email: _____ Occupation: _____

Confidential messages may be left for me via (check all that apply):

Recording at office Recording at home Email Fax Other: _____

How did you hear of our Office: Yellow Pages (City) _____ Friend: _____

Plano Bar Referral Allen Online Findlaw Lawyers.com Other: _____

May Ms. Northcutt call the referring person or friend and thank him/her for the referral? Yes No

Topics to discuss at your appointment:

Fee Agreement for Initial Consultation

Charges for an initial office consultation must be paid at the time of the appointment unless other arrangements have been made with the attorney prior to the appointment. Consultation charges are as follows:

Up to one-half hour: \$80.00

Over one-half hour up to two hours: \$40.00 per quarter hour or fraction thereof.

No services will be performed beyond the initial consultation without a written engagement contract.

Your questions about professional fees are invited. The attorney-client relationship is better served by open discussion of fees. This information has been provided to you so that you will have a pre-interview opportunity to consider financial arrangements.

The State Bar of Texas investigates and prosecutes professional misconduct committed by Texas attorneys. Although not every complaint against or dispute with a lawyer involves professional misconduct, the State Bar's Office of General Counsel will provide you with information about how to file a complaint if you feel one is warranted. You may call 1-800-932-1900 for more information.

I have read and understand the above, and agree to pay the above consultation fee.

Your signature

Date

Children

Name: _____ Age: _____ Marital Status: _____

Address: _____ Phone: _____

_____ Grandchildren: _____

Name: _____ Age: _____ Marital Status: _____

Address: _____ Phone: _____

_____ Grandchildren: _____

Name: _____ Age: _____ Marital Status: _____

Address: _____ Phone: _____

_____ Grandchildren: _____

Name: _____ Age: _____ Marital Status: _____

Address: _____ Phone: _____

_____ Grandchildren: _____

Name: _____ Age: _____ Marital Status: _____

Address: _____ Phone: _____

_____ Grandchildren: _____

Guardian of the Children's Estate and / or Person, if Applicable

(Two persons can serve together as long as they are married.)

NAME	ADDRESS	PHONE NUMBER	RELATIONSHIP
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

Do you want a Directive to Physicians? _____ Yes _____ No

MUTUAL CONSENT AGREEMENT

We, _____ and _____,
the undersigned, hereby consent and authorize Carolyn L. Northcutt to represent both of us in our respective estate plans. We have been advised that there could be conflicts of interest that either exist now or could arise in the future, and we acknowledge that Ms. Northcutt has advised us of the advisability of seeking independent counsel. We also acknowledge, consent and agree that any communication either oral or written between either of us to Ms. Northcutt that is meant to be confidential will not be disclosed to the other spouse.

Signature

Signature

Asset Information

	<i>Assets</i>	<i>Value</i>	<i>Comments</i>
Life Insurance – Husband	_____	_____	_____
Life Insurance – Wife	_____	_____	_____
Husband’s IRAs, 401(k)s	_____	_____	_____
Wife’s IRAs, 401(k)s	_____	_____	_____
Residence	_____	_____	_____
Other real estate	_____	_____	_____
Stocks, Bonds, Mutual Funds	_____	_____	_____
Cash, CD’s, Savings, Checking	_____	_____	_____
Notes (people owe you money)	_____	_____	_____
Business Interests	_____	_____	_____
Cars, Jewelry, Furniture, etc.	_____	_____	_____
TOTAL ESTATE	=====		

Who do you want to name as Executor of your estate?

(Spouses normally name each other first.)

NAME	ADDRESS	PHONE NUMBER	RELATIONSHIP
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

Who do you want to name as Agent on your Business Power of Attorney?

(Spouses normally name each other first. This power of attorney gives the person or persons you name the power to sign your name if you are unable to do so. For instance, it can be used to sign a deed or a tax return, or to make gifts of your property.)

NAME	ADDRESS	PHONE NUMBER	RELATIONSHIP
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

Who do you want to name as Agent on your Medical Power of Attorney?

(Spouses normally name each other first.)

NAME	ADDRESS	PHONE NUMBER	RELATIONSHIP
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

Where do you plan to keep your original documents?

DISTRIBUTIONS TO BENEFICIARIES AFTER YOUR DEATH

If you have children:

Do you want them to receive their inheritance in lump sum at age _____,
or in installments at the following specified ages _____

If one of your children dies before you:

Does that child's inheritance go (1) _____ to his/her children, or
(2) _____ to your other living children?

Do you wish to make any special gifts of property or cash to any individuals?

Yes _____ No _____

Specify their name, address, and the item or amount:

Do you wish to make any gifts to your church or other charitable organizations?

Yes _____ No _____

If so, is the gift to be effective at (1) _____ your death,
(2) _____ you and your spouse's death,
(3) _____ minor child attaining the age of _____ years, or
(4) _____ other (specify)? _____

If making a charitable gift, provide the exact name of the organization, address, and percent or dollar amount of gift.

Are there any relatives whom you specifically do not want to receive anything from your estate?

Yes _____ No _____

If so, whom? _____

Are there any debts that you wish to forgive? Yes _____ No _____

If so, whom, the present amount, and the amount to forgive (or all)?

After the death of you and your spouse, if any, and after all special gifts have been distributed, whom do you want to receive the rest of your estate?

In equal shares to children (check here) _____, or:

Name _____	Relationship _____	Percentage _____
Name _____	Relationship _____	Percentage _____
Name _____	Relationship _____	Percentage _____
Name _____	Relationship _____	Percentage _____