

ESTATE PLANNING QUESTIONNAIRE

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HIGHLY CONFIDENTIAL

This questionnaire is designed to help us gather the information necessary to properly plan to protect your assets (or the assets of a family member or friend). Whether you are a new or an established client, we have found this questionnaire extremely helpful and we ask your indulgence in completing it fully. Those questions that do not apply to you, your family, or your financial situation may simply be ignored. Please feel free to attach additional pages where space is insufficient, or to provide other information you feel is relevant.

DATE: _____

Client _____
(first) (middle) (last) Please indicate how you would like your name to appear on documents.

Married Single Widowed Divorced Separated or about to divorce

Spouse: _____
(first) (middle) (last) Please indicate how you would like your name to appear on documents.

Home Address: _____

Email: _____

Client

Spouse

Telephone Numbers _____
(home) (home)

(cell) (cell)

Date of Birth: _____

US Citizen?: [] Yes [] No [] Yes [] No

Social Security Number: _____

Military Service: _____

Date of Marriage: _____

SECTION 2. CHILDREN

List all children. Copy and attach additional pages, if needed. Total number of children: _____

1. _____ (name of child) Please indicate how you would like their name to appear on documents. _____ (date of birth)
_____ (current address) _____ (phone number)
_____ (email address)

2. _____ (name of child) Please indicate how you would like their name to appear on documents. _____ (date of birth)
_____ (current address) _____ (phone number)
_____ (email address)

3. _____ (name of child) Please indicate how you would like their name to appear on documents. _____ (date of birth)
_____ (current address) _____ (phone number)
_____ (email address)

4. _____ (name of child) Please indicate how you would like their name to appear on documents. _____ (date of birth)
_____ (current address) _____ (phone number)
_____ (email address)

5. _____ (name of child) Please indicate how you would like their name to appear on documents. _____ (date of birth)
_____ (current address) _____ (phone number)
_____ (email address)

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SECTION 3. FIDUCIARIES

Please consider who you want to handle your affairs when you cannot. ***We will discuss this section at our conference and will assist you with the completion.***

A. EXECUTORS (Co-Executors Act: Separately or Jointly)

1. _____
(name) (relationship) email Address

(current address) (phone number)

2. _____
(name) (relationship) email Address

(current address) (phone number)

Co-Executor with Previous Name
(May surviving Co-Executor act alone? Yes No) or Successor Executor

B. TRUSTEES (Co-Trustees Act: Separately or Jointly) _____
*** (Social security number)***

1. _____
(name) (relationship) email Address

(current address) (phone number)

2. _____
(name) (relationship) email Address

(current address) (phone number)

Co-Trustee with Previous Name
(May surviving Co-Executor act alone? Yes No) or Successor Executor

C. GUARDIANS OF MINOR CHILDREN (Co-Guardians Act Separately or Jointly)

1. _____
(name) (relationship) email Address

(current address) (phone number)

2. _____
(name) (relationship) email Address

(current address) (phone number)

Co-Guardian with Previous Name
(May surviving Co-Guardian act alone? Yes No) or Successor Guardian

D. AGENTS UNDER POWER OF ATTORNEY (Co-Agents Act: Separately or Jointly)

1. _____
(name) (relationship) email Address

(current address) (phone number)

2. _____
(name) (relationship) email Address

(current address) (phone number)

Co-Agent with Previous Name
(May surviving Co-Agent act alone? Yes No) or Successor Agent

E. AGENTS UNDER HEALTH CARE POWER OF ATTORNEY

1. _____
(name) (relationship) email Address

(current address) (phone number)

2. _____
(name) (relationship) email Address

(current address) (phone number)

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SECTION 4. DISPOSITIVE PLANNING

A. First-choice beneficiaries: Spouse Children Spouse and Children Other

B. Second-choice beneficiaries: Spouse Children Spouse and Children Other

D. Any specific disposition of your residence?

E. Any specific gifts of special articles, such as art or jewelry?
