



**PARTNER/SPOUSE PRELIMINARY INFORMATION** (exactly as you'd like it to appear on your documents)

LAST NAME: \_\_\_\_\_ PARTNER LAST NAME: \_\_\_\_\_

FIRST NAME: \_\_\_\_\_ PARTNER FIRST NAME: \_\_\_\_\_

MIDDLE: \_\_\_\_\_ MIDDLE: \_\_\_\_\_

JR., SR. II, III, IV? \_\_\_\_\_ JR., SR. II, III, IV? \_\_\_\_\_

Name I prefer to be called: \_\_\_\_\_ Name I prefer to be called: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

SSN: \_\_\_\_\_ SSN: \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

HOME CITY: \_\_\_\_\_ HOME STATE: \_\_\_\_\_ HOME ZIP: \_\_\_\_\_

COUNTY OF RESIDENCE: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ (NAME) CELL PHONE: \_\_\_\_\_ (NAME)

U.S. Citizen? Yes \_\_\_\_\_ No \_\_\_\_\_ (Country: \_\_\_\_\_) U.S. Citizen? Yes \_\_\_\_\_ No \_\_\_\_\_ (Country: \_\_\_\_\_)

Send Mail Where? Home \_\_\_\_\_ Office \_\_\_\_\_ Other \_\_\_\_\_

Where is the best place to reach each of you? \_\_\_\_\_

Name \_\_\_\_\_

Name \_\_\_\_\_

PREFERRED EMAIL: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_

PLACE OF EMPLOY: \_\_\_\_\_

WORK PHONE: \_\_\_\_\_

FAX: \_\_\_\_\_

Is email a good way to reach you? Yes \_\_\_\_\_ No \_\_\_\_\_ If so, at which address? Name \_\_\_\_\_ Name \_\_\_\_\_ Both \_\_\_\_\_

Would you like to be added to our e-newsletter (includes important client updates & estate planning information) Yes \_\_\_\_\_ No \_\_\_\_\_

CHILDREN: (1) \_\_\_\_\_ D.O.B.: \_\_\_\_\_

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

\_\_\_\_\_

phone: \_\_\_\_\_

PARENTS (if not from this marriage): \_\_\_\_\_

D.O.B.: \_\_\_\_\_

(2) \_\_\_\_\_

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

\_\_\_\_\_

phone: \_\_\_\_\_

PARENTS (if not from this marriage): \_\_\_\_\_

D.O.B.: \_\_\_\_\_

(3) \_\_\_\_\_

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

\_\_\_\_\_

phone: \_\_\_\_\_

PARENTS (if not from this marriage): \_\_\_\_\_

(4) \_\_\_\_\_ D.O.B.: \_\_\_\_\_

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

\_\_\_\_\_

phone: \_\_\_\_\_

PARENTS (if not from this marriage): \_\_\_\_\_

(5) \_\_\_\_\_ D.O.B.: \_\_\_\_\_

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

\_\_\_\_\_

phone: \_\_\_\_\_

PARENTS (if not from this marriage): \_\_\_\_\_

***Please just fill out the following information to the best of your knowledge. This is not meant to be time consuming. We will let you know if you need to provide additional information.***

***Values may be approximate.***

<u>ASSET INFORMATION</u>	<u>VALUE</u>	<u>COMMENTS</u>
Life Insurance	_____	_____
IRAs, 401(k)'s, Profit Sharing, etc.	_____	_____
Residence	_____	_____
Other Real Estate	_____	_____
Stocks, Bonds, Mutual Funds	_____	_____
Cash, CD's Savings, Checking	_____	_____
Notes Where People Owe You Money	_____	_____
Business Interests	_____	_____
Cars, Jewelry, Furniture, etc.	_____	_____
TOTAL ESTATE:	=====	

Do you have any pets? \_\_\_\_\_ (Yes/No) If yes, what kind: \_\_\_\_\_

Please provide us with copies of your existing Wills, Trust Agreement(s), Powers of Attorney, and Living Wills.

How did you hear about us? \_\_\_\_\_

If referred, whom may we thank? \_\_\_\_\_

Are you currently working with a financial planner/advisor? Yes \_\_\_ No \_\_\_  
 If no, would you be interested in talking to someone regarding your options? Yes \_\_\_ No \_\_\_

Are you currently working with an insurance agent? Yes \_\_\_ No \_\_\_  
 If no, would you be interested in talking to someone regarding your options? Yes \_\_\_ No \_\_\_

Are you currently working with a CPA? Yes \_\_\_ No \_\_\_  
 If no, would you be interested in talking to someone regarding your options? Yes \_\_\_ No \_\_\_

What topics would you like to discuss at your appointment?  
 \_\_\_\_\_  
 \_\_\_\_\_