DAVID N. BRYAN, P.A.
CONFIDENTIAL ESTATE PLANNING QUESTIONNAIRE

Date:

I. Family Data:

Client Full Name:

Client Date of Birth:

Spouse Full Name:

Spouse Date of Birth:

Home Address:

Home Phone No.:

Client Business Address:

Client Business Phone, Fax and Cell No.:

Spouse Business Address:

Spouse Business Phone, Fax and Cell No.:

Client Period of Residence in North Carolina:

Spouse Period of Residence in North Carolina:

Child 1 Full Name:

Child 1 Date of Birth:

Child 2 Full Name:

Child 2 Date of Birth:

Child 3 Full Name:

Child 3 Date of Birth:

II. Summary of Assets and Liabilities: Generally, there is no federal estate tax for combined client and spouse assets of less than $1,000,000.00. **If you fall into this category, you may choose to skip this section**.

Cash in Bank Accounts:

Individual Retirement Accounts:

Stocks and Bonds:

Real Estate:

Life Insurance (surrender value):

Automobiles:

Other Assets:

Mortgage on Real Estate:

Other Notes to Financial Institutions:

Loans on Insurance Policies:

Other Financial Liabilities:

III. Dispositive Information: Please list to whom you want to leave your assets in the event of your death. Please list alternates to receive each gift in the event the person you name precedes you in death.

Primary Beneficiary in Will (Client):
Primary Beneficiary in Will (Spouse):

Do you have any specific gifts you would like to leave to a specific person or charity?

Beneficiary of All Remaining Assets (Residuary Estate for Client):

Beneficiary of All Remaining Assets (Residuary Estate for Spouse):

IV. Representative Information: Please list who you would want to serve in the following cases. Please list **alternates** to serve in the event a primary representative is unable to serve.

In the event of your death, who do you want to take care of...

- Administering Your Estate (Executor):

- Your Minor Children (Guardian of Person):

V. Trusts for Minors or Others:

If you have minor children at the time of the execution of your will, or a child with special needs, we can set up a trust within the Last Will and Testament document to control the distribution of assets to minors.

Who do you want to serve as the Trustee to administer any trust created under a will or other document? Please list alternates.

At what age you want the beneficiary to receive the principal or corpus of the trust (e.g. the age at which they will receive the money unrestricted, age 25):

VI. Other Estate Planning Documents:

In addition to discussing your last will and testament...

Would you like to name someone a durable power of attorney to handle your financial affairs in the event of your mental or medical incapacity?

_______ Yes _______ No

Would you like to name a health care agent to give someone power to make medical decisions for you in the event of your mental or medical incapacity?

_______ Yes _______ No

Would you like a living will to express your desires concerning the use or non-use of medical procedures to prolong your life in case of terminal illness?

_______ Yes _______ No

In the event of your mental or medical incapacity, who would you want to take care of your...

- Financial Decisions (Primary and Alternates):

- Health Care Decisions (Primary and Alternates):

Do you want to discuss anything else? Please list:

Complete and Return To:
David N. Bryan, P.A.
Post Office Box 1238
Holly Springs, North Carolina 27540-1238
Tel.: (919)552-9995
Fax: (919)552-9996
E-Mail: davidbryan@dnblaw.com