

## ESTATE PLANNING QUESTIONS

Please answer the following questions to the best of your ability. They will be very helpful in preparing you for your appointment.

Your Full Name:

Home Phone:

Work Phone:

Cell Phone:

Address:

Email Address:

Employer, if any:

Date of Birth:

Citizenship:

### PROFESSIONAL ADVISORS

Do you have a financial advisor? \_\_\_yes \_\_\_no      Phone number: \_\_\_\_\_

    If yes, name: \_\_\_\_\_      May we contact them? \_\_\_yes \_\_\_no

Do you have a CPA / accountant? \_\_\_yes \_\_\_no      Phone number: \_\_\_\_\_

    If yes, name: \_\_\_\_\_      May we contact them? \_\_\_yes \_\_\_no

### MEDICAL

Do you have a long term care insurance policy? \_\_\_yes \_\_\_no

Special Needs/Health Concerns:

**CHILDREN'S INFORMATION**

**Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_ **Married?** \_\_\_\_\_

**Home Address:** \_\_\_\_\_  
\_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Work Phone:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Citizenship if not US:** \_\_\_\_\_

**Special concerns about this child or his or her family situation:**

**Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_ **Married?** \_\_\_\_\_

**Home Address:** \_\_\_\_\_  
\_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Work Phone:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Citizenship if not US:** \_\_\_\_\_

**Special concerns about this child or his or her family situation:**

**Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_ **Married?** \_\_\_\_\_

**Home Address:** \_\_\_\_\_  
\_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Work Phone:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Citizenship if not US:** \_\_\_\_\_

**Special concerns about this child or his or her family situation:**

**Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_ **Married?** \_\_\_\_\_

**Home Address:** \_\_\_\_\_  
\_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Work Phone:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Citizenship if not US:** \_\_\_\_\_

**Special concerns about this child or his or her family situation:**

**Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_ **Married?** \_\_\_\_\_

**Home Address:** \_\_\_\_\_

\_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Work Phone:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Citizenship if not US:**

**Special concerns about this child or his or her family situation:**

**Have any of your children passed away? If so, name:** \_\_\_\_\_

### **MISCELLANEOUS QUESTIONS**

**Do you anticipate an inheritance from someone else's Will or Trust? \_\_\_yes \_\_\_no**

If yes, please bring a copy of the Will or Trust to your appointment and an estimate of the approximate amount anticipated (if possible).

**Who should manage your estate at your death?**

**Primary Name:**

**Address:**

**Alternate Name:**

**Address:**

**Do you have any guns that are listed on the National Firearms Act (NFA)? \_\_\_yes \_\_\_no**

**If you have children under age 18, who should be their Guardian at your death?**

**Primary Name:**

**Address:**

**Alternate Name:**

**Address**

Name of Financial Institutions	Client	Joint with Survivorship	Other	Beneficiary (if known)
Checking Accounts				
	\$	\$	\$	
	\$	\$	\$	
	\$	\$	\$	
	\$	\$	\$	
	\$	\$	\$	
Savings Accounts				
	\$	\$	\$	
	\$	\$	\$	
	\$	\$	\$	
	\$	\$	\$	
	\$	\$	\$	
Money Market Accounts				
	\$	\$	\$	
	\$	\$	\$	
	\$	\$	\$	
	\$	\$	\$	
Cert's of Deposit				
	\$	\$	\$	
	\$	\$	\$	
	\$	\$	\$	
	\$	\$	\$	

	Client	Joint with Survivorship	Other	Beneficiary (if known)
<b>U. S. Treasury Investments (Savings Bonds, etc.)</b>				
	\$	\$	\$	
	\$	\$	\$	
<b>Stocks &amp; Bonds, Brokerage Acc'ts, Mutual Funds</b>				
	\$	\$	\$	
	\$	\$	\$	
	\$	\$	\$	
	\$	\$	\$	
	\$	\$	\$	
	\$	\$	\$	
<b>Notes Receivable</b>				
	\$	\$	\$	
	\$	\$	\$	
<b>Non-tax-qualified Deferred Annuities</b>				
	\$	\$	\$	
	\$	\$	\$	
	\$	\$	\$	
	\$	\$	\$	
<b>Business Interests / Ltd Partnerships</b>				
	\$	\$	\$	
	\$	\$	\$	



	Client	Joint with Survivorship	Other	Beneficiary (if known)
<b>Personal Property</b>				
Vehicle 1	\$	\$	\$	
Vehicle 2	\$	\$	\$	
Vehicle 3	\$	\$	\$	
Vehicle 4	\$	\$	\$	
Boat	\$	\$	\$	
Trailer	\$	\$	\$	
Personal property of unusual value	\$	\$	\$	
Other	\$	\$	\$	
Other	\$	\$	\$	
Other	\$	\$	\$	
<b>Death Benefit of Life Insurance</b>				
	\$	\$	\$	
	\$	\$	\$	
	\$	\$	\$	
	\$	\$	\$	
Other asset not otherwise addressed				
	\$	\$	\$	
	\$	\$	\$	
	\$	\$	\$	
<b>Total Financial Investments</b>	\$0.00	\$0.00	\$0.00	

<b>Annual Gross Income from Last Year Tax Return</b>	
Employment Income	\$
Employment Income	\$
Investment Income	\$
Social Security	\$
Civil Service Pension	\$
Military Pension	\$
Rental Income	\$
Alimony	\$
Other	\$
<b>Total Annual Gross Inc.</b>	<b>\$0.00</b>

	Total Owed	Monthly Payment	Notes
<b>Debts Owed</b>			
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	



## DIRECTIONS TO YORK COUNTY OFFICE

1700 George Washington Memorial Highway, Suite D  
York County, VA 23693  
(757) 898-0898

**From I-64:** (East or West), take the Route 17, George Washington Memorial Highway exit North toward Yorktown (258B). After passing through five traffic signals the office complex will be about another 1/4 mile ahead on your right.

**From Victory Blvd.:** Turn south onto Route 17, George Washington Memorial Highway (toward I-64). At the second traffic signal (Coventry Blvd.) make a U-turn, heading North on Route 17. The office complex will be about 1/4 mile ahead on your right.

**From Route 17 - North of Victory Blvd:** Proceed south on Route 17. Cross Victory Blvd. and proceed to the second traffic signal (Coventry Blvd.). Make a U-turn, heading North on Route 17. The office complex will be about 1/4 mile ahead on your right.

**Landmarks:** The office complex sits between the Royal Farms and Speedway gas station/convenience store. Look for a brick building with green awnings.

## DIRECTIONS TO GLOUCESTER OFFICE

Office is Open by Appointment Only

6558 Main Street, Suite 2  
Gloucester Courthouse, VA 23061  
(804) 824-9439

**From North of Gloucester:** Take George Washington Memorial Hwy / US-17 S toward Gloucester Courthouse. Left turn onto Business 17. Follow Business 17 partially around the courthouse circle, remaining on Business Route 17 (Main Street). 6558 Main St is on the right shortly after you exit the circle. Parking is available behind the building or on the street.

**From South of Gloucester:** Take George Washington Memorial Hwy / US-17 N toward Gloucester Courthouse. Right turn onto Business 17. Follow Business 17 through downtown. Office will be on your left, just prior to the courthouse circle. Parking is available behind the building or on the street.

**Landmarks:** We are located in the Morgan Building. The Good Life Kitchen is across the hall.

## DIRECTIONS TO McLAWS OFFICE

Office is Open by Appointment Only

**430 McLaws Circle, Suite 100  
Williamsburg, VA 23185  
(757) 645-4520**

From I-64 East or West: Follow 64 to VA-199 W via EXIT 242A toward Williamsburg/ Jamestown. Once on 199, merge onto US 60 – Pocahontas Trail (toward Williamsburg / Busch Garden). Take the first right onto McLaws Circle. Go about a third of a mile; 430 McLaws Circle is on your left. When you enter the parking lot, look to the end of the parking lot. You will see a building with the name “Leebcor” on the top. Our office has a separate entrance to the right of the main entrance.

«END IF»«END IF»