

CONFIDENTIAL QUESTIONNAIRE

Please answer the following questions. Your answers provide a basis for discussing your specific estate plan needs and intentions. The answers will be used to draft your documents. Please answer the questions as completely as possible. If certain questions do not apply to you, please mark them as "N/A." All information supplied is strictly confidential and necessary to provide you with proper advice. We will discuss any questions you have about the requested information when we meet.

1. Your legal name: _____

2. Spouse / Partner's legal name: _____

3. Do you currently have a will? [] Yes (*Please have it available*) [] No

4. Home address: _____

Telephone number: _____

5. Date of birth: _____

Place of birth: _____

Citizenship: _____

6. Have you been married? [] Yes [] No

If "Yes" did marriage end in [] death or [] divorce?

Year marriage ended: _____

If there was a divorce, please have a copy of the divorce decree available.

7. Do you have a domestic partnership agreement in effect? [] Yes [] No

If "Yes" please have a copy available for review.

8. Do you have any children? [] Yes [] No (*Skip to Question 9 if you have no children*)

a. Do any of your children have special needs or handicapped? [] Yes [] No

b. Who has physical custody of the children? _____

c. Please list all of your children, including adopted children. Include names, city, state, and ages.

Name	City, State	DOB
_____	_____	_____
_____	_____	_____

(8. cont.)

d. Please identify any children who have predeceased you:

(Use other side if additional space is needed)

SPECIFIC BEQUESTS OF PROPERTY

In many situations a person tells family members how (s)he wants the personal property divided. Generally, these items are not specifically mentioned in the will. This leaves you free to create a separate list that you may change whenever you like without having to rewrite your will. You can use the will to make a specific bequest if you are concerned your wishes will not be honored. A specific bequest may also be appropriate if you intend to leave an item to a nonfamily member.

9. Please indicate the specific item(s) you want distributed and the name of the person(s) to whom you are leaving the item(s).

(Use other side if additional space is needed)

10. PETS. If you have pets you may want to consider what happens to them after your death. You may want to provide that a specific individual cares for your pets. In that situation, you may want to provide a specific monetary bequest to that person for the care of the pet.

BENEFICIARIES OF YOUR ESTATE

Please think about who you want to name to inherit your estate. You must also consider who will inherit the balance of your property (after the personal representative distributes the specific bequests, if any). Example: Do you want everything to go to your spouse or partner? If you have children, do you want to provide for them? Grandchildren? Other family members? Do you want everyone to receive equal shares?

11. Name the person(s) to whom you want to leave your estate:

Name: _____

Relationship: _____

City/State: _____

Name: _____

Relationship: _____

City/State: _____

(Use other side if additional space is needed)

12. Name the person(s) you wish to be the alternate beneficiary of your estate:

Name: _____

Relationship: _____

City/State: _____

Name: _____

Relationship: _____

City/State: _____

(Use other side if additional space is needed)

GUARDIANSHIP OF MINOR CHILDREN

If you have children under the age of 18 you need to consider naming a guardian. Natural parents have priority in these matters. You can name someone to be the guardian of the person and of the estate. If you do not name a guardian, and there is no other natural parent, the probate court will appoint one for any minor child(ren).

13. **Guardians**

a. First choice for guardian:

Name: _____

Relationship: _____

City/State: _____

b. Alternate choice for guardian:

Name: _____

Relationship: _____

City/State: _____

PERSONAL REPRESENTATIVE

Every will needs an individual to act as the personal representative (also known as the executor). This is the person responsible for collecting all the property at the time of death and paying all legal debts, taxes, and expenses out of the property collected. The personal representative is also responsible for distributing the remaining property to the people named in your will. The personal representative can be anyone over the age of eighteen or it can be an institution. It is advisable to name an alternate executor in case the first person is unable or unwilling to accept the responsibility. Your personal representative will be compensated from the estate assets according to a schedule set by Maine law. The personal representative may choose to waive the fee.

14. **Personal Representative**

a. First choice for personal representative:

Name: _____

Relationship: _____

City/State: _____

b. Alternate choice for personal representative:

Name: _____

Relationship: _____

City/State: _____

15. WILL CONTEST. Consider whether any family member is apt to file a will contest. If you think that may happen, you may want to include a provision to deter people from filing a will contest. You can provide that anyone contesting the will receives nothing from the estate. Generally, you will need to leave a specific bequest sufficient to make an heir think twice before contesting your will.

16. TAX ISSUES. In order to determine if tax planning is required for your estate it is important to estimate the overall value of your accumulated property. This includes life insurance and all property listed in your name. There are federal and Maine state tax laws to consider. We will discuss the alternatives at the interview.

Estimated value of your total assets at present: (Check one)

a. Under \$1 million

b. Over \$1 million

POWER OF ATTORNEY FOR FINANCES AND HEALTH CARE

Apart from your wishes for after your death, it can be crucial that you have plans in place in the event you become incapacitated or unable to manage your finances. *Power-of-attorney for finances* allows the person you name to act on your behalf for specific financial decisions that need to be made. The *power-of-attorney for health care* (also called a *living will*) provides the person you name to make medical decisions on your behalf based on your wishes stated in the power-of-attorney document.

17. Do you want to sign a durable power of attorney for finances? Yes No

a. Whom do you want to name as your attorney-in-fact (the person to whom you are giving the authority to act on your behalf)?

Name: _____

Address: _____

Telephone number: _____

Relationship: _____

(17. cont.)

b. Alternate Attorney-in-fact:

Name: _____

Address: _____

Telephone number: _____

Relationship: _____

18. Do you want to sign a health care power of attorney and living will? [] Yes [] No

a. First choice (the person designated to make health care decisions for you):

Name: _____

Address: _____

Telephone number: _____

Relationship: _____

b. Alternate choice:

Name: _____

Address: _____

Telephone number: _____

Relationship: _____

ASSETS WORKSHEET

Generally a will does not list each and every item of property that you want to convey following your death, however, it is important to have a list of assets and accounts for your personal representative to be able to efficiently perform their duties. This information can also assist in the preparation to the will.

19. REAL PROPERTY (e.g., residence, vacant land, rental property, vacation home).
Please have your deeds available for review.)

(i) Location: _____

Owners: _____

Mortgage holder: _____

(19. cont.)

(ii) Location: _____

Owners: _____

Mortgage holder: _____

(Use other side if additional space is needed)

20. BANK ACCOUNTS (Indicate whether checking, savings, brokerage account, or CDs)

Name/location of financial institution: _____

Name of account holder (specify if joint or payable on death):

Name/location of financial institution: _____

Name of account holder (specify if joint or payable on death):

Name/location of financial institution: _____

Name of account holder (specify if joint or payable on death):

Name/location of financial institution: _____

Name of account holder (specify if joint or payable on death):

(Use other side if additional space is needed)

20. IRAs, RETIREMENT PLANS (including 401k accounts):

Name/location of financial institution: _____

Name of account holder: _____

Name of beneficiary: _____

Name/location of financial institution: _____

Name of account holder: _____

Name of beneficiary: _____

Name/location of financial institution: _____

Name of account holder: _____

Name of beneficiary: _____

Name/location of financial institution: _____

Name of account holder: _____

Name of beneficiary: _____

(Use other side if additional space is needed)

21. STOCKS, BONDS, MUTUAL FUNDS, INCLUDING U.S. SAVINGS BONDS

Name(s) of stocks/bonds/funds: _____

How holdings are held: _____

Name(s) of stocks/bonds/funds: _____

How holdings are held: _____

Name(s) of stocks/bonds/funds: _____

How holdings are held: _____

(Use other side if additional space is needed)

22. TITLED VEHICLES - list all cars, trucks, boats, and motorcycles:

Year/make/model: _____

Titled owner: _____

Year/make/model: _____

Titled owner: _____

(Use other side if additional space is needed)

23. OTHER IMPORTANT ASSETS (e.g., stamp/coin/other collections, business interests, partnerships, lottery winnings):

(Use other side if additional space is needed)

24. LIFE INSURANCE POLICIES

Name on policy: _____

Beneficiary: _____

Name on policy: _____

Beneficiary: _____

(Use other side if additional space is needed)

Please note any additional questions you want to discuss during the interview:
