

Estate Planning New Matter Information

CLIENT INFORMATION								
Name (first, middle, last)		E-mail Address						
Address (street, city, state, zip)								
radioss (street, sity, state, 2.p)								
Home Phone	Work Phone		Cell Phone					
How were you referred to our office?								
Have you had any prior contact with our o		No						
If yes, what was the nature of the contact								
Signature		 Date						
Olgi latal 6		Date						



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PERSONAL INFORMATION						
		Client			Client #2 if married	
Name (first, middle, last)						
Date of Birth						
Country of Citizenship						
		CHII DDEN	FROM THIS MAR	DIAGE		
Name		Date of Birth	FROW THIS WAR	RIAGE	City and State of Residence	
	CH	IILDREN FRO	OM OTHER RELA	TIONSHIPS	6	
Name	Date of Bi	rth	Child of		City and State of Residence	
			ı			
		ANTICIP	ATED INHERITAN	CES		
Do you expect to receive		_	Yes No			
If yes, provide the estima						
 Are you a beneficiary of a Do you have the right to 			_		e us with a copy of the trust agreement. No	
If yes, please provide us	-				NO	
7 / 1	17		ESTATE PLANNIN	NG		
1. Do you have a will? Yes No If yes, please provide us with a copy.						
2. Have your ever signed a Community Property Agreement with your current spouse? Yes No						
If yes, please provide us with a copy.						
3. Do you have a pre- or post-nuptial agreement? 🔲 Yes 🗌 No If yes, please provide us with a copy.						
Do you have a trust agre			yes, please provide			
5. Have you previously exe		Power of Attor	ney of General Pow	er of Attorn	ey?	
If yes, please provide us with a copy.						



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ASSET INFORMATION						
Description	Owner*	Fair Market Value	Description	Owner*	Fair Market Value	
Pei (cla	rsonal Effect othing, jewelry)		Hous (furniture, s	ehold furnishings ilverware, dishes, etc.)		
(husband and wife jointly husba						

^{* (}husband and wife jointly, husband only, wife only, other)

VEHICLES, BOATS AND MOTOR HOMES						
	Vehicle No. 1	Vehicle No. 2	Vehicle No. 3			
Outstanding loan on vehicle						
Date loan will be paid in full						
Estimated fair market value						

VEHICLES, BOATS AND MOTOR HOMES						
	Account No. 1	Account No. 2	Account No. 3	Account No. 4		
Nature (checking, savings, cd)						
Owner						
Approximate Balance						

PUBLICLY TRADED STOCKS AND BONDS						
	1	2	3	4	5	
Description (including number of shared of face value of bonds)						
Owner						
Fair Market Value						

(if securities are held in a broker account, please attach copy of your most recent broker statement and provide information requested below.)



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			RE	AL ES	TATE			
		PARCE			PARCEL 2		PARCE	L 3
Nature (residential, co farm, timber, e	mmercial, renta tc.)	al						
Location of F								
Owner (husband and only, or wife or								
Manner in wh (joint tenants w survivorship, to common, or of	enants in	d						
Acquired before marriage	ore or after							
Estimated fai	r market value	•						
Outstanding property	debt on							
Date mortgag should be pa								
(if you have add	ditional properti	es, please list time on a	separate docum	ent.)				
		DEFERRED C	OMPENSATIO	N, RET	TREMENT AND PE	NSION PLANS	5	
If you curren	tly have sala	ry earnings, are you	deferring inco	me into	qualified plans or ta	x sheltered anr	nuities?	
Hus	band:	Yes No _	% of Sa	alary				
Wife	e :	Yes No _	% of Sa	alary				
		t plans, pensions, l nt of annual taxable		heltered	annuities. If you are	e taking distribu	tions from ar	ıy account,
		1	2		3	4		5
Owner (husba	and or wife)							
Type of Retire	ement Plan							
Current Acco	unt Balance							
Current Amou								
Lifetime Annuities	Primary							
Beneficiary	Alternate							
Death	Primary							
Beneficiary	Alternate							



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INTERESTS IN CLOSELY HELD BUSINESS						
	1	2	3			
Company Name						
Organizational Structure						
Fair Market Value of the Company						
Your basis in stock in the company						
Does the Company have a retirement plan						
What type of plan?						
* Please provide us with a copy of the	entity's bylaws, partnership, buy-sell or	stock purchase agreements.				

LIFE INSURANCE						
		Policy 1	Policy 2	Policy 3		
Name of Life Company	Insurance					
Type of Policy (Term, Whole I						
Insured						
Face Amount						
Beneficiaries	Primary					
Delicitaties	Alternate					

LIABILITIES						
Creditor	Debtor	Nature of Debt	Amount			

Privacy Notice

The law firm is required to maintain client confidentiality pursuant to the Rules of Professional Conduct administered by the Washington State Bar Association. If you have any question about how we maintain confidentiality, ask Juliet Laycoe.

Representation Not Guaranteed:

An initial consultation with the law firm does not guarantee that the law firm will accept your case or represent you in your legal matter. If the law firm agrees to represent you, the agreement will be pursuant to a written free agreement or confirmed by an engagement letter.