



ESTATE PLANNING SNAPSHOT QUESTIONNAIRE

ANDERSEN FIRM

DATE COMPLETED:

YOUR PERSONAL INFORMATION

Salutation	Your legal name	Name you want us to call you	Current occupation. If retired, from what?	Gross annual income
Your Mailing Address/Street		City	State/Zip	County and state of residence
Home phone	Business phone	Date of Birth	Date of Marriage	Social Security number
Other phone	E-mail	Your health: <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor		US Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No
Marital Status	Have you ever lived as a married couple and acquired property in CA, WA, NV, AZ, NM, TX, ID, LA or WI? <input type="checkbox"/> Yes <input type="checkbox"/> No		Do you currently have an estate plan (i.e. trust, will, etc.)? <input type="checkbox"/> Yes <input type="checkbox"/> No	

YOUR SPOUSE/PARTNER'S PERSONAL INFORMATION

Salutation	Your legal name	Name you want us to call you	Current occupation. If retired, from what?	Gross annual income
Your Mailing Address/Street		City	State/Zip	County and state of residence
Home phone	Business phone	Date of Birth	Date of Marriage	Social Security number
Other phone	E-mail	Your health: <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor		US Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No
Marital Status	Have you ever lived as a married couple and acquired property in CA, WA, NV, AZ, NM, TX, ID, LA or WI? <input type="checkbox"/> Yes <input type="checkbox"/> No		Do you currently have an estate plan (i.e. trust, will, etc.)? <input type="checkbox"/> Yes <input type="checkbox"/> No	

YOUR CHILDREN, if any (please use an additional sheet if necessary)

Legal name	Sex	Whose child is this?	Date of Birth	Social Security No.	Spouse's name	How many children?
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BENEFICIARIES OTHER THAN YOUR CHILDREN, if any (please an additional sheet if necessary)

Legal name	Sex	Relationship	Date of Birth	Social Security No.	Any special Notes
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Who referred you to us?	Name	Firm	Phone
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OTHER KEY PEOPLE

Name	Relationship	Phone
Name	Relationship	Phone
Name	Relationship	Phone

Your Assets Company Name	Value In Your Name	Value in Spouse/ Partner's Name	Value Held Jointly	Amount of Debt on Asset
Cash Accounts				
Investment Accounts				
Stocks				
Bonds				
Personal Effects				
Retirement Plans				

Your Assets				
Company Name	Value In Your Name	Value in Spouse/ Partner's Name	Value Held Jointly	Amount of Debt on Asset
Insurance Policies				
Pension Plans				
Annuities				
Monies Owed To You				
Partnership, LLC, or LPA Interests				
Corporate Business Interests				
Sole Proprietorship Business Interests				
Oil, Gas & Mineral Interests				
Real Property				
TOTALS				