



The Spahn Law Firm, PLLC
Matt W. Spahn
The Estate Planning Attorney with the Heart of a Teacher

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Date: _____ **CONFIDENTIAL**

INDIVIDUAL WITH NO CHILDREN PRELIMINARY INFORMATION

First Name Middle Last (Sr., Jr., etc.)

Preferred Name (*what I like to be called*)

Street Address

City State Zip County

Phone Numbers and E-mail:

Home Cell E-mail

Date of Birth Social Security # (*not required*)

Other ID

Are you a US Citizen?

Yes No

EMPLOYMENT INFORMATION

(If Retired, Please Give Us Some Work History)

Working Retired

Company / Industry

What do / did you do?

Years working / worked

MARITAL HISTORY

Widowed Divorced

Former spouse's name

Date of marriage

Date of divorce

State of divorce

Date of death

ASSET INFORMATION

Life Insurance

<u>Company</u>	<u>How Titled/Owned</u>	<u>Beneficiary</u>	<u>Face Value</u> <i>Amt payable at death</i>
_____	_____	_____	_____
_____	_____	_____	_____

Annuities

<u>Company</u>	<u>How Titled/Owned</u>	<u>Beneficiary</u>	<u>Value</u>
_____	_____	_____	_____
_____	_____	_____	_____

IRAs, 401 (K)'s, Profit Sharing, etc.

<u>Company</u>	<u>How Titled/Owned</u>	<u>Beneficiary</u>	<u>Value</u>
_____	_____	_____	_____
_____	_____	_____	_____

Investment Accounts/Stocks, Bonds, Mutual Fund

<u>Company</u>	<u>How Titled / Owned</u>	<u>Beneficiary</u>	<u>Value</u>
_____	_____	_____	_____
_____	_____	_____	_____

Cash, CD's, Savings, Checking

<u>Bank/Credit Union Name</u>	<u>How Titled / Owned</u>	<u>Authorized Users</u>	<u>Value</u>
_____	_____	_____	_____
_____	_____	_____	_____

Residence/Home

<u>Address</u>	<u>County</u>	<u>Mortgage Balance</u>	<u>Value of Home</u>
_____	_____	_____	_____

Other Real Estate

<u>Address</u>	<u>County</u>	<u>Mortgage Balance</u>	<u>Value</u>
_____	_____	_____	_____
_____	_____	_____	_____

Business Interest

<u>Business</u>	<u>% Owned by You</u>	<u>Value</u>
_____	_____	_____

Cars

<u>Make / Model</u>	<u>Year</u>	<u>Outstanding Note</u>	<u>Value</u>
_____	_____	_____	_____
_____	_____	_____	_____

Notes Receivable *(This is a debt payable to you.)*

<u>Debtor</u>	<u>Date Due</u>	<u>Outstanding Bal.</u>	<u>Value</u>
_____	_____	_____	_____

Personal Property

*[Total value of all the contents in & around your home.
(e.g., furniture, jewelry, household items, collectibles, etc.)]*

Total

TOTAL ASSETS

INCOME INFORMATION:

Possible Inheritance

(From your parents, relatives, etc.)

Income:

Other Income:

Total Yearly Income:

Did anyone refer you to us?

Yes

No

Who?

May we send a thank you note?

Yes

No

YOUR TEAM:

CPA

_____ (phone #)

Financial Advisor

_____ (phone #)

Insurance Agent (Home/Auto)

_____ (phone #)

WHAT TOPICS WOULD YOU LIKE TO DISCUSS AT YOUR APPOINTMENT?

NAME YOUR 1ST CHOICE FOR EXECUTOR/TRUSTEE OF YOUR ESTATE

(You may name co-executors/trustees.)

1. _____

WHO DO YOU NAME AS ALTERNATES IN CASE YOUR 1ST CHOICE CANNOT SERVE?

2. _____

3. _____

HOW DO YOU WANT YOUR ASSETS TO BE DISTRIBUTED?

WHO DO YOU WANT TO NAME AS AGENT ON YOUR (FINANCIAL) DURABLE POWER OF ATTORNEY? *(The alternates are usually the same as your alternate executors/trustees. This power of attorney gives the person or persons you name the power to sign your name if you are not able to do so. For instance, it can be used to sign a deed or tax return.)*

1. _____

2. _____

3. _____

WHO DO YOU WANT AS TO NAME AS AGENT ON YOUR MEDICAL POWER OF ATTORNEY? *(In other words, who do you trust to be able to listen to doctors, then direct the doctor's actions?)*

1. _____
2. _____
3. _____

HAVE YOU CONSIDERED A DIRECTIVE TO PHYSICIANS & FAMILY?
(most commonly called a Living Will)

DO YOU HAVE OTHER ISSUES OR CONCERNS TO DISCUSS?
(like organ donation)

The Spahn Law Firm
Protecting and Preserving What's Most Precious to You