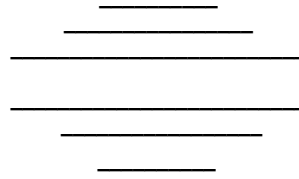


JOHNSTON LEGAL GROUP PC



Estate Planning Questionnaire (for Single Client)

The following information will help me advise you of your estate planning options and prepare your documents quickly and accurately. The more information you can provide, the more efficient the planning process will be. However, please do not spend too much time finding every last document or number before our meeting; any needed information or paperwork can also be obtained later.

Date: _____

1. Full name (as you will sign your will)

2. Address _____
County _____

Have you ever lived in any state other than Texas? _____
State _____

Date you moved to Texas _____

3. Phone Numbers

a. Home _____ c. Fax _____

b. Work _____ d. Cell _____

email address: _____

4. Birthdate: _____

Country of Citizenship: _____

Social Security Number _____ (Optional)

5. Occupation: _____

Yearly Income: _____

Family-owned Business Information:

Name _____

Address _____

Description _____

EIN (optional) _____

6. Marital History

a. Are you currently married? Yes ___ No ___

Date & state of marriage:

Spouse Name: _____

b. Widowed? Yes ___ No ___

Name of deceased spouse:

Date of death _____ County/State of Residence at death _____

Did spouse leave a will?

Yes ___ No ___ (if yes, please include a copy of the will)

Was it probated? Yes ___ No ___

c. Divorced? Yes ___ No ___

Name of ex-spouse:

Date and state of divorce:

Any financial obligations relating to divorce?

d. Are there any premarital or post-marital agreements in effect?

Yes ___ No ___ (please include a copy)

7. Children & Grandchildren (please include any who are deceased)

a. Children Birthdate State of Residence

- 1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

b. Grandchildren Birthdate State of Residence Parent's Name

- 1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

c. Which descendants listed above are deceased? _____

8. Assets

a. Real Estate State Approx. Value Mortgage Balance
 Residence _____
 Other _____
 Other _____

b. Savings/Checking/Brokerage Accounts

Account Type	Financial Institution	Value or Balance
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

c. IRAs Institution/Custodian Balance Primary Beneficiary

d. Employee Benefit Plans (For defined contribution plans, such as 401(k) plans, please list the current account balance. For defined benefit plans, please indicate either your projected monthly benefit or projected lump sum payment. For stock options, please indicate current value.) Please list.

Plan Type	Institution/Administrator	Balance	Beneficiary
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Yearly Contribution (for defined contribution plans): _____

e. Life Insurance (list cash value and payoff value)

Institution/Administrator	Cash Value	Payoff Amount	Primary Beneficiary
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

f. Trust Interests (including powers of appointment)

g. Other Major Assets (fine artwork, pending lawsuits, etc.)

h. Anticipated
Inheritance

Name of Person Who May Leave You Something

Relationship

Rough Estimate of Amount:

i. Business Interests

Ownership Arrangement (partnership/S-corp., etc.)

Approx. Value

j. Automobiles & Vehicles (including boats & trailers)

Year & Make Date Acquired Owner on Title Issuer State Value Loan

k. Digital Assets

Describe the asset(s) and your desires re the asset(s):

l. Loaned or Stored Assets:

9. Liabilities (excluding mortgages or car loans listed above)

	Description	Amount
1. Consumer Debts	_____	_____

2. Business Debts _____

10. Have you ever made any taxable gifts? (please include copies of gift tax returns that you have filed)

Recipient	Amount	Date	Source of Funds
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

11. Dispositive Plan

a. Do you presently have a will? Yes ___ No ___
(please include a copy, if readily available)

b. What are your estate planning objectives? (simplify probate, avoid income or estate taxes, provide for disabled relatives, make charitable gifts, set up generation-skipping trusts, etc.)

c. In general, to whom do you want your estate to be distributed?

• Your wills will set up basic trusts for any minor children, grandchildren, or other relatives who might inherit under your will. At what age should these trusts terminate and distribute the assets outright to the children?

12. Fiduciaries

Your executor is responsible for probating your will and distributing your assets to your beneficiaries. Married persons often appoint their spouses as primary executor. Many banks and other institutions will serve as executor for a fee, but often it is best to appoint one of your heirs who is willing to serve for free.

If you have minor children, you should appoint a guardian to take care of them if both their parents die before they reach age 18 (you can also appoint a married couple as co-guardians). You must also appoint a trustee to manage any money the children inherit. The trustee and the guardian are frequently the same person; if you prefer to appoint different people to these posts, please make a note in the margin. If you wish to appoint more alternates than the space below allows, please use the back of this sheet.

a. Executor
 Primary
 Name: _____
 City & State: _____
 Relationship: _____

b. Guardian and Trustee for minor children
 Primary
 Name: _____
 City & State: _____
 Relationship: _____

First Alternate

First Alternate

Name: _____
City & State: _____
Relationship: _____

Name: _____
City & State: _____
Relationship: _____

Second Alternate
Name: _____
City & State: _____
Relationship: _____

Second Alternate
Name: _____
City & State: _____
Relationship: _____

13. Other Estate Planning Documents

a. Statutory Durable Power of Attorney

This document allows your designated agent to handle all of your personal affairs, including the execution of contracts, motor vehicle registrations, real estate sales, bank account transactions, etc., and is important if you become incapacitated in any way.

Primary
Name: _____
Relationship: _____

First Alternate
Name: _____
Relationship: _____

Second Alternate
Name: _____
Relationship: _____

b. Medical Power of Attorney

This document allows your designated agent to make decisions on your behalf regarding your health care in the event you cannot make them yourself. It becomes effective only upon your incapacity as certified by your physician. Your agent will have authority to consent to surgery, check you into a nursing home, obtain records about your care, etc.

Primary
Name: _____
Address: _____
Relationship: _____
Telephone #: _____

First Alternate
Name: _____
Address: _____
Relationship: _____
Telephone #: _____

Second Alternate
Name: _____
Address: _____
Relationship: _____
Telephone #: _____

c. Living Will (also called Advance Directive to Physicians and Family)

This document instructs physicians and hospitals what action to take if you are suffering from a terminal or irreversible condition and are unable to communicate or make decisions for yourself. We can discuss this document more fully when we meet, but for now please consider the following questions:

1. A "terminal condition" is one from which you are expected to die within six months even with all available life-sustaining treatments. If you are suffering from a terminal condition, do you request only those treatments needed to keep you comfortable, or do you request all available life-sustaining treatments?

_____ Comfort treatment only. _____ All life-sustaining treatments.
_____ Undecided.

2. An "irreversible condition" is one from which you are expected to die even with all available life-sustaining treatments, but with which you may remain alive for more than six months. If you are suffering from an irreversible condition, do you request only those treatments needed to keep you comfortable, or do you request all available life-sustaining treatments?

_____ Comfort treatment only. _____ All life-sustaining treatments. __ Undecided.

d. Declaration of Guardian in the Event Need Arises

This document allows you to designate who you want to serve as your guardian in the event a guardianship is instituted. The purpose of the Statutory Durable Power of Attorney is to avoid a costly guardianship; however, if a guardianship is instituted, the durable power of attorney is automatically revoked. An important feature of this document is that you can designate who you do not want to serve as your guardian and the judge cannot appoint those persons under any circumstance. Most people generally choose for their guardians the same persons they appointed in their Statutory Durable Power of Attorney and their Health Care Power of Attorney; if this is what you wish to do, just leave this section blank.

Guardian for Financial Purposes:

Primary: _____

Alternate: _____

Alternate: _____

Guardian for Health Care Purposes

Primary: _____

Alternate: _____

Alternate: _____

Persons you wish to exclude:

e. Beneficiary of Life Insurance, Ira, Retirement Plans

Life insurance, individual retirement accounts, and other retirement plans are payable to a beneficiary upon your death. You may need to change the beneficiary designation to coordinate with the provisions in your will. For example, if your beneficiaries are minor children, you might want to change the beneficiary designation to the “Testamentary Trustee Appointed Under My Will”. Please discuss this with your attorney. I recommend that you obtain a copy of each current beneficiary designation to be reviewed by your attorney.

f. Joint Accounts

Texas statutes authorize several types of joint accounts with financial institutions, such as joint accounts with rights of survivorship, POD accounts, trustee accounts. These types of accounts have significant legal consequences. You may need to change these accounts to coordinate with the provisions in your will. I recommend that you obtain a copy of each current account agreement with your financial institution to be reviewed by your attorney.

If you have any property owned as joint tenant with right of survivorship discuss with your attorney.

g. Custodial Accounts

If you are the fiduciary or beneficiary of any custodial accounts, discuss the details with your attorney.

h. Appointment of Agent to Control Disposition of Remains

Texas law also governs the priority of persons who have a right to make decisions about the disposition of a dead person’s remains. The law also permits a person to designate an agent to make decisions about the disposition of his or her remains in a written instrument. If you wish to make such a designation, please list the agent or agents you wish to designate.

1st _____

2nd _____

3rd _____

JOHNSTON LEGAL GROUP PC
B. C. Cornish, Attorney at Law
4200 Airport Freeway
Fort Worth, Texas 76117

Phone: 817-820-0825
Fax: 817-820-0830