



## **ESTATE PLAN QUESTIONNAIRE**

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CONFIDENTIAL PERSONAL AND FINANCIAL INFORMATION FOR:

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*Please review and fill out the questionnaire as completely as possible. If you are unsure of how to respond, just leave your answer blank and we can fill in the gaps at our meeting. This information will be used in developing and implementing your estate plan and will remain confidential. If you decide not to have a plan prepared, we will return the information to you.*

*To make the most productive use of our meeting time, you may wish to send in the questionnaire in advance of our meeting. Please use the address or fax number below for this purpose. Please call if you have any questions.*

*NOTE: Neither the submission of this information to DSH, nor the acceptance of this information by DSH, will create an attorney-client relationship. Such a relationship will only be created by a separate express agreement between you and the firm.*

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ESTATE PLAN QUESTIONNAIRE

**YOUR PERSONAL INFORMATION**

HUSBAND/MALE		WIFE/FEMALE	
Name		Name	
DOB		DOB	
SSN		SSN	
Citizenship		Citizenship	

Mailing Address: \_\_\_\_\_ Apt. No. \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ County: \_\_\_\_\_ Zip: \_\_\_\_\_

Alternate address (i.e. summer/winter residence): \_\_\_\_\_ Apt. No. \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ County: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_

**FAMILY INFORMATION**

Present marital status:     Married     Single     Divorced     Widowed

Prior marriages?    Husband/Male:     Yes     No    Wife/Female:     Yes     No

Any agreements with spouse (or former spouse), such as Pre-Nuptial Agreements, Post-Nuptial Agreements, or Divorce Settlements? \_\_\_\_\_

CHILDREN			
HUSBAND'S		WIFE'S <input type="checkbox"/> same as Husband	
Name:	DOB:	Name:	DOB:
Name:	DOB:	Name:	DOB:
Name:	DOB:	Name:	DOB:
Name:	DOB:	Name:	DOB:
Name:	DOB:	Name:	DOB:

PETS	
Do you have a dog or cat or other pet for which you would like to make provisions? <input type="checkbox"/> Yes <input type="checkbox"/> No	
What is your pet's name? _____ Age _____ Species _____	
Breed: _____ Who should care for your pet? _____ Michigan law now allows you to leave a small fund for the care of your pet. How much would you like to leave for the care of your pet? \$ _____ (suggested range is \$1,000 to \$10,000).	

**ASSETS**

Type of Asset	Ownership (Husband, Wife, Joint, Joint with third party, Tenants in common, etc.)	Approximate Value
<b>Real Estate</b>		
Primary Residence		
Vacation/Second Home		
Other Real Estate		
<b>Business Interests (describe)</b>		
<b>Investments</b>		
Brokerage Account		
Brokerage Account		
Stocks (certificated)		
Stocks (certificated)		
Bonds		
Mutual Fund		
Mutual Fund		
Other		
<b>Retirement Plan Assets (401(k), 403(b), Pension, Profit-Sharing, IRA)</b>		

Type of Asset	Ownership	Approximate Value
<b>Bank Accounts</b>		
Checking		
Savings		
Money Market		
Certificates of Deposit		
<b>Other Assets</b>		
Annuities		
Life Insurance		
Tangible personal property (i.e. artwork, antiques, jewelry, etc.)		

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### GIFT TAX RETURNS

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Have you ever filed a gift tax return to report a gift made? \_\_\_\_\_ If so, please bring copies of the gift tax return(s) to our meeting.

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### FIDUCIARIES

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Perhaps the most important decisions which need to be made in establishing an estate plan involve choosing the persons or organizations who will be responsible for carrying out your plan. They are called "fiduciaries", and they perform functions as your personal representative, trustee, agent, guardian for minor children, and patient advocate, depending on which aspect of your plan designates them. They may have responsibilities to you, or to your heirs, or both. You should be prepared to name a primary fiduciary and at least one alternate for each position. Generally, you can name more than one person to a position at the same time. In such a case, they will serve together as co-trustee, or co-personal representative, etc., as the case may be. For decisions such as medical treatment and personal financial matters, a trusted family member is often designated. For post-death estate administration, some people choose trusted friends or family members to act as trustees, while others feel that a bank or trust company will exercise more independent judgment or bring more expertise. The decision depends on a number of factors, including the size of the estate, the length of time over which the plan will be carried out, the potential for conflicts of interest, and the suitability and willingness of friends and family to do the job.

Please designate your chosen fiduciaries for each position described below. We can always change them after further discussion.

**AGENT/ATTORNEY-IN-FACT - DURABLE POWER OF ATTORNEY**

Your agent or attorney-in-fact can act for you to handle your personal business, such as accessing your bank accounts, investments, buying and selling property, negotiating contracts, signing tax returns, and generally doing all the things you could otherwise do for yourself. Obviously, you must have complete trust in the person you choose, because they will have considerable power over your affairs. The power of attorney can be made to become effective only if you are determined to be incapacitated.

Do you want the Durable power of Attorney to be effective only if you have been determined to be incapacitated?  Yes  No, I want it to be effective right away.

<b>DURABLE POWER OF ATTORNEY</b>			
<b>HUSBAND/MALE</b>		<b>WIFE/FEMALE</b>	
Agent		Agent	
Alternate		Alternate	

**PATIENT ADVOCATE**

The patient advocate is responsible for making medical treatment decisions for you in the event you cannot do so yourself. Acting in that capacity, he or she will have access to your medical records, and will be able to discuss your medical condition and treatment options with your physicians and health care personnel. If authorized by the Patient Advocate Designation, your patient advocate can legally make decisions to withhold or withdraw medical treatment (including artificial administration of water and food) which may hasten death.

Do you want to authorize your patient advocate to make decisions to withhold or withdraw medical treatment (including artificial administration of water and food) even though they may hasten death?

Husband/Male:  Yes  No      Wife/Female:  Yes  No

<b>PATIENT ADVOCATE DESIGNATION</b>			
<b>HUSBAND/MALE</b>		<b>WIFE/FEMALE</b>	
Patient Advocate		Patient Advocate	
Alternate		Alternate	

**TRUSTEE**

Usually, you will be the primary trustee of your revocable trust until your death or incapacity. Your successor trustee will take over for you at that time. If you are incapacitated, your successor must administer the trust for your benefit. At your death,

the successor trustee must administer the trust for the benefit of your beneficiaries. The duties will include all financial management of the trust assets, filing tax returns, accounting to the beneficiaries, and distributing the assets in accordance with your directives. Serious consideration should be given to naming a bank or trust company as successor trustee. You can name more than one successor trustee at a time, to act as Co-Trustees.

SUCCESSOR TRUSTEE			
HUSBAND/MALE		WIFE/FEMALE	
Trustee		Trustee	
Alternate		Alternate	
2 <sup>nd</sup> Alternate		2 <sup>nd</sup> Alternate	

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**PERSONAL REPRESENTATIVE**

The personal representative is in charge of carrying out your last will and testament. Many people refer to them as the executor. Because most of the estate plans we prepare involve the use of one or more lifetime trusts, the personal representative's duties are often quite limited. For this reason, the person designated as Trustee is almost always named as personal representative as well.

PERSONAL REPRESENTATIVE			
HUSBAND/MALE		WIFE/FEMALE	
Per. Rep.		Per. Rep.	
Alternate		Alternate	
2 <sup>nd</sup> Alternate		2 <sup>nd</sup> Alternate	

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**GUARDIAN FOR MINOR CHILDREN**

The guardian for minor children will be responsible for the physical and emotional care of the orphaned children. The surviving parent will generally assume those duties in the event of one parent's death.

GUARDIAN FOR MINOR CHILDREN			
HUSBAND/MALE		WIFE/FEMALE	
Guardian		Guardian	
Alternate		Alternate	

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**YOUR DISTRIBUTION PLAN**

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Your distribution plan is your written instruction to your successor trustee. It tells him or her, usually in general terms, how much to distribute to the beneficiaries, and when to make the distributions. If all of your intended beneficiaries are responsible adults, your plan may be as simple as instructing your trustee to distribute the assets to them as soon as possible after your death. In that case, your trust would wind up shortly after your death. If the beneficiaries may include younger persons, say, under the age of 25, you may wish to consider continuing the trust until they reach a certain age. Often, distributions are set up in stages (half at age 25, the balance at 30, for example), rather than occurring all at once. This reduces the risk that a young beneficiary,

suddenly having more money than experience, will squander his or her inheritance. Often, a distribution plan instructs the trustee to hold assets in a common fund for the benefit of the children as a group, rather than requiring the assets to be divided into separate shares. In such a case, the estate isn't divided until the youngest child reaches a certain age, usually 21 years or more.

There are many aspects to consider in developing your distribution plan, and we can discuss the details at our meeting. Please complete this section to describe your overall objectives for your distribution plan, such as managing funds for young beneficiaries, making charitable gifts, or providing lifetime care for a disabled beneficiary.


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**WITNESSES**

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Please name at least two friends or acquaintances who can come to the signing and act as witnesses when you sign your estate plan documents. It is best if these individuals are not beneficiaries.


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**\*\*\*\*\*IMPORTANT NOTICE -- PLEASE READ\*\*\*\*\***

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Completing this questionnaire does not create a legally binding estate plan. It is not equivalent to creating a will or trust or any other legal document and must not be relied upon as such.

Receipt or acceptance of the completed questionnaire by Driggers, Schultz & Herbst, P.C. or any person employed by or affiliated the firm, does not create an attorney-client relationship with any person. Such an attorney-client relationship may be formed, if at all, only by a separate express agreement with the firm.