

Ι.

## \*\*\*\* Personal, Confidential & Privileged \*\*\*\*

Family Information						
Α.	De	Decedent				
	1.	Full name				
	2.	Also known as				
	3.	Address(es) at date of death				
	4.	Date of death				
	5.	Place of death				
	6.	Date of birth				
	7.	Place of birth				
	8.	Domicile (if different from address)				
	9.	Date domicile established				
	10. Social Security Number					
	11	Citizenship				
	12	Veteran/branch of service				
	13. I.D. number					
	14. Employer (at time of death)					
	15. Occupation					
Β.	De	cedent Spouse (if any)				
	1.	Full name				
	2.	Address				
	3.	Social Security Number				
	4.	Date of birth				
	5.	Was marriage terminated prior to Decedent's death? 🗌 Yes 🔲 No				
		If yes, date of termination:				
		If yes, by death or divorce?				
lf D	)ece	dent married more than once:				
	Na	me of spouse				
	Date of marriage					
	Place of marriage					
	Domicile at date of marriage					
	Date of marriage					

Date of termination of marri	age							
By death or divorce?								
Name of spouse								
Date of marriage								
Place of marriage								
Domicile at date of marriage								
Date of marriage								
Date of termination of marriage								
By death or divorce?								
Family Information								
Children of Decedent (list s	Children of Decedent (list surviving children first):							
Full Name	Date of Birth and Date of Death (if deceased)	Address						
Parents of Decedent:								
Full Name	Date of Death (if deceased)							
Siblings of Decedent:								
Full Name	Relationship	Full or Half Sibling?						

## I. Fiduciary Information A. Executor<sup>1</sup> 1. Name\_ 2. Home address \_\_\_\_\_ 3. Home phone \_\_\_\_ 4. Mobile phone \_\_\_\_\_ 5. Personal e-mail address \_\_\_\_ 6. Business address 7. Business phone \_\_\_\_\_ 8. Business e-mail address \_\_\_\_\_ B. Trustee<sup>2</sup> 9. Name \_\_\_\_\_ 10. Home address \_\_\_\_ 11. Home phone \_\_\_\_ 12. Mobile phone \_\_\_\_\_ 13. Personal e-mail address \_\_\_\_ 14. Name of trust officer (if a corporate trustee) 15. Title of trust officer (if a corporate trustee) 16.Trust officer e-mail address C. Professional Advisors 1. Name of Accountant Address \_\_\_\_\_ Phone \_\_\_\_ E-mail address \_\_\_\_ 2. Name of Insurance Agent/Consultant \_\_\_\_\_ Address \_\_\_\_ Phone \_\_\_\_\_ E-mail address \_\_\_\_ 3. Name of Investment Advisor Address \_\_\_\_ Phone \_\_\_\_\_ E-mail address \_\_\_\_ 4. Name of Banker \_\_\_\_ Address \_\_\_\_ Phone \_\_\_\_

D. Miscellaneous Data

1.	Was the Decedent making payments pursuant to a divorce or property settlement order?	🗌 Yes	🗌 No
	If yes, please send a copy with this Questionnaire.		

- Was the Decedent a signatory on a foreign bank account? Yes No
   If yes, please describe
- 3. Was the Decedent a party to any judicial proceedings or lawsuits? 
  Yes No
  If yes, please describe
- E. Documents To Bring To First Meeting With Attorney (copies or originals):
  - 1. Wills and all codicils
  - 2. Death certificate
  - 3. Trusts (and any trust amendments) established by Decedent
  - 4. Trusts of which decedent or another family member is a beneficiary
  - 5. Gift tax returns filed by Decedent and/or Decedent's spouse
  - 6. Court documents from any lawsuit or judicial proceeding involving Decedent