



## Estate Planning Questionnaire

**Husband** Name: \_\_\_\_\_  
Complete Address: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
Organ Donor?  Yes  No

**Wife** Name: \_\_\_\_\_  
Complete Address: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
Organ Donor?  Yes  No

**Children** (including those legally adopted)  
Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Is it ok for a representative of Edward Jones contact you?  Yes  No

Is it ok for a representative to contact you regarding Life Insurance?  Yes  No

### WILL

Please outline a brief description of the wishes for distribution of property at death. Most married couples wish to bulk their property to pass to their spouse outright or for his/her lifetime, and then pass to their mutual child(ren) in trust upon the death of the surviving spouse. The property would then be held in trust until the child(ren) reach the age of majority or beyond, with principal payments at specific ages.

Specific Bequests: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Initial**

**Name and contact information**

**Executor**

For Husband:  Spouse Relationship  
(1st to be notified) Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_

For Wife:  Spouse Relationship  
(1st to be notified) Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_

**Alternate**

**Name and contact information**

**Executor**

For Husband:  Spouse Relationship  
(2nd to be notified) Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_

For Wife:  Spouse Relationship  
(2nd to be notified) Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_

**FAMILY TRUST**

**Initial**

**Name and contact information**

**Trustee**

For Husband:  Spouse Relationship  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_

For Wife:  Spouse Relationship  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_

**Alternate  
Trustee**

Name and contact information

For Husband:  Spouse Relationship  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_

For Wife:  Spouse Relationship  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_

**Trust  
Information**

Distributions to be made for children:

- Normal living expenses (including food, clothing, shelter) Until Age \_\_\_\_\_
- Education expenses Until Age \_\_\_\_\_
- Healthcare expenses Until Age \_\_\_\_\_

Age for Trustee to distribute one-half of all accumulated income and principal in the beneficiary's Trust account Age \_\_\_\_\_

Age for Trustee to distribute any remaining balance of all accumulated income and principal in the beneficiary's Trust account Age \_\_\_\_\_

**Additional  
Trust  
Wishes**

Please list any additional wishes you want the Trustee to carry out:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**GUARDIANS FOR MINOR CHILDREN**

**Initial  
Guardian**

Name and contact information

For Husband:  Spouse Relationship  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
 Guardian of person  Guardian of estate





