

ESTATE PLANNING QUESTIONNAIRE

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| | |
|--------------------|--|
| Date | |
| Referred By | |

| | |
|---|--|
| CLIENT | |
| Name (as it appears on your driver license) | |
| Nicknames | |
| Email - Personal | |
| Email - Work | |
| Phone - Cell | |
| Phone - Home | |
| Phone - Work | |
| Phone - Fax | |
| Address - Home | |
| Address - Work | |
| Occupation | |
| Age | |
| Years in Florida | |
| U.S. Citizen? | |

| CLIENT'S FAMILY | | |
|------------------------|-------------------------|----------------------|
| | Name and Address | Age Under 18? |
| Spouse | | |
| Children | | |
| Parents | | |
| Brothers & Sisters | | |
| Other | | |

| | | |
|---|-------------------------|--------------------------|
| CLIENT'S SPOUSE'S FAMILY | | |
| | Name and Address | Age Under 18? |
| Children | | |
| Parents | | |
| Brothers & Sisters | | |
| Other | | |

| CLIENT'S ASSETS | | |
|-----------------------------|--------------------|-----------------|
| | Description | \$ Value |
| Homestead | | |
| Other Real Estate | | |
| Bank Accounts | | |
| IRA and Retirement Accounts | | |
| Investment Accounts | | |
| Businesses | | |
| Life Insurance | | |
| Vehicles | | |
| Jewelry, Furniture, Etc. | | |
| Other | | |

| CLIENT'S LIABILITIES | | |
|--|-------------------------|------------------|
| | Name and Address | \$ Amount |
| Mortgage Loans | | |
| Vehicle Loans | | |
| Bank Loans | | |
| Divorce, Marital Prenuptial, Postnuptial | | |
| Other | | |

| CLIENT'S ADVISORS | |
|--------------------------|-------------------------|
| | Name and Address |
| Accountants | |
| Brokers | |
| Insurance Agents | |
| Other | |

| REPRESENTATIVES | Who does client want to act for client in case of client death or incapacity? |
|------------------------------------|--|
| | Name and Address |
| Personal Representative | |
| Alternate Personal Representatives | |
| Trustee | |
| Alternate Trustees | |
| Guardian | |
| Alternate Guardians | |
| Health Care Surrogate | |
| Alternate Health Care Surrogates | |
| Other | |

| DISPOSITION ON DEATH | Who does client want to leave assets to at death? |
|--|--|
| | Item, Beneficiary Name, and Address |
| Homestead Real Estate - Primary Beneficiaries | |
| Homestead Real Estate - Alternate Beneficiaries | |
| Other Real Estate - Primary Beneficiaries | |
| Other Real Estate - Alternate Beneficiaries | |
| Tangible Personal Property - Primary Beneficiaries | |
| Tangible Personal Property - Alternate Beneficiaries | |
| Other Specific Gifts | |
| All Remaining Assets (Residuary) | |

| TRUSTS | If a beneficiary is under the age of 18 years, does client want his or her share held in trust? |
|---|--|
| Trustees | |
| Alternate Trustees | |
| Pay income beginning at age 21? | |
| Pay distributions of principal in thirds at ages 25, 30 and 35? | |
| Other | |

| EXISTING DOCUMENTS | | | |
|--|-----------------------|--------------|-------------------------|
| | Copy Attached? | Dates | Who Has Original |
| Wills | | | |
| Codicils | | | |
| Separate Writings (Tangible Property) | | | |
| Trust Agreements, Amendments, Restatements | | | |
| Divorce, Marital Prenuptial, Postnuptial | | | |
| Life Insurance Statements & Beneficiaries | | | |
| IRA and Retirement Account Statements & Beneficiaries | | | |
| Bank, Investment, and Financial Account Statements | | | |
| Real Estate Tax Bills, Deeds, Title Insurance, Surveys | | | |
| Other Documents | | | |

| ESTATE PLAN DOCUMENTS | |
|--|--|
| Will | |
| Living Trust | |
| Durable Power of Attorney | |
| Living Will | |
| Designation of Health Care Surrogate | |
| Designation of Health Care Surrogate for Minor | |
| Declaration of Preneed Guardian | |
| Declaration of Preneed Guardian for Minor | |
| Beneficiary Designation for Life Insurance, IRA, Retirement Accounts, Etc. | |
| Other | |

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