

Estate Planning Information Sheet

Spouse Number 1

Name: _____

Email Address: _____

Telephone Number(s): _____

Date of Birth: _____

US Citizen: Yes () No () Prior Marriage: Yes () No ()

Prior Will: Yes () No () Existing Trust: Yes () No ()

Spouse Number 2

Name: _____

Email Address: _____

Telephone Number(s): _____

Date of Birth: _____

US Citizen: Yes () No () Prior Marriage: Yes () No ()

Prior Will: Yes () No () Existing Trust: Yes () No ()

Home Address: _____

Children

Child Number 1

Name: _____

Date of Birth: _____

Child of Both Parents: Yes () No () Married: Yes () No ()

Number of Children: _____

Children (continued)

Child Number 2

Name: _____

Date of Birth: _____

Child of Both Parents: Yes () No () Married: Yes () No ()

Number of Children: _____

Child Number 3

Name: _____

Date of Birth: _____

Child of Both Parents: Yes () No () Married: Yes () No ()

Number of Children: _____

Child Number 4

Name: _____

Date of Birth: _____

Child of Both Parents: Yes () No () Married: Yes () No ()

Number of Children: _____