

***CONFIDENTIAL***

ESTATE PLANNING INFORMATION

---

***INDIVIDUAL***

*a worksheet produced exclusively for the clients of*

**GODDARD & HAWKINS, P.C.**

**ATTORNEYS AT LAW**

1444 BLAKE STREET  
DENVER, CO 80202  
PHONE: 303-292-3228  
FAX: 303-292-1956

**PERSONAL INFORMATION**

LEGAL NAME

OTHER NAMES USED

HOME ADDRESS

COUNTY

HOME PHONE

EMAIL ADDRESS

OCCUPATION

BUSINESS ADDRESS

BUSINESS PHONE

CELL PHONE

REFERRED BY

**CHILDREN**

NAME

DATE OF BIRTH

ADDRESS (IF NOT LIVING AT HOME)

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Is there a possibility of additional natural or adopted children?  
Please note any adopted children and step-children.

Yes No (circle one)

**OTHER BENEFICIARIES**

NAME

RELATIONSHIP

DATE OF BIRTH  
(IF A MINOR)

ADDRESS (CITY/STATE)

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

# ESTIMATED PERSONAL BALANCE SHEET

## ASSETS

If you bring a recent personal financial statement to the meeting, only fill out the insurance section at the end.

RESIDENCE	_____
OTHER REAL PROPERTY	_____
BANK ACCOUNTS AND CERTIFICATES	_____
RETIREMENT PLAN BENEFITS (IRA, 401(k), SEP)	_____
PUBLICLY TRADED STOCKS AND BONDS	_____
CLOSELY HELD STOCK & PARTNERSHIP INTERESTS	_____
AUTOMOBILES	_____
ART, STAMP, COIN OR OTHER COLLECTIONS	_____
MISCELLANEOUS HOUSEHOLD PROPERTY	_____
FACE VALUE OF LIFE INSURANCE	_____
OTHER (IDENTIFY)	_____
OTHER (IDENTIFY)	_____
<b>TOTAL ASSETS</b>	=====

## LIABILITIES

REAL ESTATE MORTGAGES	_____
OTHER LIABILITIES	_____
<b>TOTAL LIABILITIES</b>	=====
<b>NET WORTH</b>	=====

## INSURANCE

*Detail of insurance listed above.*

<u>Insured</u>	<u>Face Amount</u>	<u>Beneficiary</u>	<u>Owner</u> (if different)	<u>Company</u>	<u>Term or Whole</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

*If you have time, please complete the following. Regardless, please review these two pages.*

**PERSONAL REPRESENTATIVES, GUARDIANS, AND TRUSTEES**

**PERSONAL REPRESENTATIVES**

	NAME	ADDRESS
Initial	_____	_____
Successor(s)	_____	_____

**GUARDIANS OF CHILDREN**

	NAME	ADDRESS
Initial	_____	_____
Successor(s)	_____	_____

Will your choice of guardian be affected by the marriage, divorce, remarriage, or relocation of the persons named? \_\_\_\_\_

**TRUSTEES OF CHILDRENS' TRUSTS**

	NAME	ADDRESS
Initial	_____	_____
Successor(s)	_____	_____

**PRIORITIES**

What are your priorities in planning your estate? Do you have any special concerns?

\_\_\_\_\_

\_\_\_\_\_

**DISPOSITION OF ESTATE**

What are your general desires as to the disposition of your estates? Indicate any specific gifts of cash or items you wish to make.

\_\_\_\_\_

\_\_\_\_\_

**OTHER CONSIDERATIONS**

Prior marriages, support or settlement obligations, prenuptial agreement, disabled children or beneficiaries.

\_\_\_\_\_

\_\_\_\_\_

**POWERS OF ATTORNEY**

Have you ever given power of attorney to another? \_\_\_\_\_ If so, to whom and when? \_\_\_\_\_

---

**SPECIAL INSTRUCTIONS**

Do you have special instructions regarding:

1. Living Will (life support) \_\_\_\_\_
2. Anatomical Gifts (organ donation) \_\_\_\_\_
3. Burial or Cremation \_\_\_\_\_

**ADVISORS**

Accountant \_\_\_\_\_

Financial Advisor \_\_\_\_\_

Insurance \_\_\_\_\_

**PLEASE BRING TO THE MEETING**

- ✓ Existing wills
- ✓ Any federal gift-tax returns
- ✓ Pre-nuptial and separation agreements
- ✓ Any trust in which you are a beneficiary
- ✓ Copy of warranty deed to any out-of-state real property you own