LAW OFFICE OF

LARRY E. CIESLA

ESTATE PLANNING QUESTIONNAIRE - SINGLE

Date ____________________

Whom may we thank for the referral to our office? ____________________________________

Do you have an old will? Yes _____ No _____ (Please bring a copy with you)

PERSONAL INFORMATION

1. Full Name____
2. Address____
   County in which you reside _______________________
   Other counties/states in which you own real estate ______________________________

3. Prior marriages? Yes _____ No _____
   If yes, are you divorced _____ or widowed _____
   Did you have a nuptial agreement? Yes _____ No _____ (Bring it with you)
   Have you ever lived in Arizona, California, Idaho, Louisiana, New Mexico, Texas, Washington or Wisconsin? Yes _____ No _____

4. Contact Information: Home Phone # _________________________________
   Work _____________________________ Cell ________________________________
   Email ____

5. Date of birth: _________________________
6. Place of birth _________________________
7. Social Security Number _________________________
8. Occupation _________________________
   Retired? Yes ____ No ____

9. Children; next of kin; or beneficiaries (Please list all children; grandchildren; next of kin; and unrelated persons you may wish to name as beneficiaries of your estate):

Names and addresses	Relationship	Dates of Birth for children (or grandchildren)

(You may attach additional pages)

10. Do you have children or other relatives dependent upon you for support? ________
    If yes, describe ____

4400 NW 23rd Avenue, Suite A, Gainesville, FL 32606 (352) 378-5603

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11. Preferred funeral home? ______________________________
12. Cremation? Yes ____ No ____
13. Preferred cemetery ______________________________
14. Do you have a pre-paid funeral plan? Yes____ No____

GOALS AND OBJECTIVES

1. Whom do you wish to name as your personal representative (executor)?
   Name ______________________________
   Relationship to you ______________________________
   Address ______________________________

   If he or she cannot serve for any reason, who would be your next choice?
   Name ______________________________
   Relationship to you ______________________________
   Address ______________________________

2. Name of guardian for any minor children?
   Name ______________________________
   Address ______________________________
   Relationship to you ______________________________

3. Whom do you wish to receive your tangible personal property (furniture, jewelry, clothing, automobiles, etc.)?
   First ______________________________
   Then to: ______________________________

4. Do you wish to make any specific gifts of property or money? Yes ____ No ____
   I wish to give: ____________________ to ____________________
   I wish to give: ____________________ to ____________________
   I wish to give: ____________________ to ____________________
   I wish to give: ____________________ to ____________________

5. Whom do you wish to receive the balance of your estate?
   ____
   ____
   ____
   ____
   (Give fractions or percentages where more than one beneficiary)

6. Does any beneficiary have any special needs (e.g., education not yet completed, is still a minor, has ongoing health concerns) so that you want additional information regarding a trust for their shares of the estate? Yes ____ No ____

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7. Would you like information regarding:
   Living Will (a document indicating that you do not want unnecessary life support system)? Yes ____ No ____
   Durable Power of Attorney? Yes ____ No ____
   Living Trust? Yes ____ No ____

8. Have you established any trusts? Yes ____ No ____
   If yes, attach a copy and state current value $____________________

9. Are you the beneficiary of any trust? Yes ____ No ____
   If yes, attach a copy and state current value $____________________

10. Do you have any obligations under a divorce decree from a prior marriage? __________
    If yes, attach a copy.

11. Do you hold a power of appointment granted to you by another person in a trust? Yes ____ No ____

ASSET INFORMATION

1. **BANK** Name ____

Location	Account #	Type of Account	Approximate Value

BANK Name ____

Location	Account #	Type of Account	Approximate Value

BROKERAGE Account with ____________________________________

Location	Account #	Type of Account	Approximate Value

BROKERAGE Account with ____________________________________

Location	Account #	Type of Account	Approximate Value

2. **SAFE DEPOSIT BOX:**

Location	Name(s) on Box

3. **REAL ESTATE**:

	Location	Name(s) on Deed	Approximate Value
Home			
Other			

Home ____

____

Other ____

____

4. **LIFE INSURANCE POLICIES:**

Insured	Name of Company	Beneficiary	Contingent Beneficiary (if any)	Value

5. **PRIVATELY HELD STOCKS/BONDS:**

Name(s) on ____

Company	Where Located	Certificates?	Approximate Value

Name of CPA ______________________________________Phone #______________________

Name of Financial Advisor ____________________________Phone #______________________

Name of Insurance Agent _____________________________Phone #_____________________

6. Have you made any gifts over $10,000.00 per year to a beneficiary or for which you filed a gift tax return? Yes ____ No ____

7. **AUTOMOBILES:**

Year & Make	Name(s) on Title

8. Do you have any debts that are secured by any assets (e.g., automobile loan, real estate mortgage, etc.)? Yes ____ No ____

Name of Lender	What Asset is Held as Security?	Credit Life Insurance?

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9. **ANNUITIES:**
Are you receiving (or do you anticipate receiving) annuity payments? ________
If yes, to whom are payments made? ___________________________________
Is this an annuity for life? ________
Will payments continue after your death (sometimes referred to as a "joint and survivor" annuity)? ________
If yes, to whom will payments be made?_________________________________

10. **RETIREMENT PLANS:**
Have you participated in a plan maintained by an employer that will provide benefits upon your retirement or death? Yes ____ No ____
If yes, attach a copy of your most recent statement.
If yes, have you executed designation of beneficiary forms? _____
If yes, attach copies of designation of beneficiary forms.
Do you have any IRA, Roth IRA, SEP IRA or other similar retirement plans?
Yes ____ No ____
If yes, attach copies of your designation of beneficiary form and most recent account statement.

11. **FOREIGN PROPERTY:**
Do you own any property in a foreign country? Yes ____ No ____
If yes, please describe ____

12. **BENEFICIARY CONCERNS:**
Do you have any concerns regarding the ability of a beneficiary of your estate to prudently manage his or her inheritance? Yes ____ No ____
If yes, please explain ____

13. **DEBTS:**
List any significant debts other than secured debts set forth in Section 8 above:
____
____
____
____

LAW OFFICE OF

LARRY E. CIESLA

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THE FOLLOWING WILL BE COMPLETED AT OUR INITIAL CONSULTATION:

Your signature below confirms the engagement of the Law Office of Larry E. Ciesla as legal counsel for you in the preparation of the following estate planning documents:

________ Revocable Trust Agreement
________ Last Will and Testament
________ Durable Power of Attorney
________ Living Will & Health Care Surrogate Designation
________ Deed(s)
________ Other ____

The attorney's fee referenced below includes any meetings or telephone conferences, the drafting of your documents and related correspondence, and written instructions and assistance regarding the funding of your trust, if any. The fee excludes actual out-of-pocket expenses such as clerk of court fees for recording deeds (usually $27.70 per deed), which will be charged in addition to the fee quoted.

In consideration of the legal services we render to you, the fee is due at the earlier of (i) 60 days after our office sends out the initial drafts of your documents; or (ii) at the time the documents are executed. It is further understood that this agreement does not cover any fees for professional services other than those listed above and that if additional services are needed you will be billed separately for them.

ATTORNEY'S FEE: ☐ Flat Fee $______________
☐ Hourly Fee @ $__________ per hour

TIME FRAMES: ☐ STANDARD - Attorney will provide drafts of documents within 30 days of initial conference, and documents will be revised as necessary and executed within 60 days of initial conference
☐ RUSH - Documents will be executed on or before (date) ________________

ACCEPTED BY: LAW OFFICE OF LARRY E. CIESLA

____
CLIENT
Date:____________________

By:_____________________________
LARRY E. CIESLA
Date:____________________

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COMPLETION OF ENGAGEMENT AND FILE RETENTION POLICY

The scope of this engagement shall be deemed completed at the time your estate planning documents are executed; deeds recorded; and written instructions conveyed to you regarding funding of your trust, if applicable. We will then have no further duty or obligation to provide you with any further services, including but not limited to alerting you to future changes in the law. We hope you will contact us with regard to any legal needs or questions you may have in the future (which would, of course, be the subject of a new engagement agreement).

It is our policy to deliver the originals of all executed estate planning documents to our clients unless, based on special circumstances, a client wishes to leave the originals in our possession. We keep copies of all executed estate planning documents in our client files. It is our policy to retain all estate planning files indefinitely (in other words, we do not ever destroy estate planning files). We do, however, reserve the right to charge an administrative fee for retrieving, copying and delivering the file to the client or the client's agent if requested in the future.

We occasionally receive document requests from third persons, such as a family member while a client is alive or a lawyer representing a family member after a client's death. We are under an ethical duty to maintain the confidentiality of your estate planning documents during your lifetime and after your death, unless disclosure is court authorized, or under certain circumstances if we determine that it would be in your best interest to release copies of your documents. However, you have the right to prevent us from ever releasing your documents except when court authorized.

☐ I direct that copies of my estate planning documents be released only when court authorized.

☐ I authorize the release of copies of my estate planning documents to third parties such as a family member while I am alive or a lawyer representing a family member after my death, if the LAW OFFICE OF LARRY E. CIESLA determines that release of the documents would be in my best interest.

☐ I hereby authorize the LAW OFFICE OF LARRY E. CIESLA to release copies of my estate planning documents upon request at any time by ______________________________ ______________________________, and I hold the LAW OFFICE OF LARRY E. CIESLA harmless for the release of my documents to the above-named person(s).

Date______________________ ______________________________________
Client