CLIENT PACKET INSTRUCTIONS

All information will be held in strict confidence

Austin LIVING TRUST®
The Estate Planning Law Firm℠
AVOID PROBATE

By requesting this packet you have taken the first step to getting your estate plan. The process is easy and convenient. Just follow these steps:

Complete the client information forms: Use the enclosed forms to help you organize your personal information and write down your basic decisions. Take the completed forms with you when you go to meet with your attorney. You'll probably still have some questions to ask about your situation, but you will save time by being prepared.

Call our office to schedule your attorney interview: Your interview time lasts about one hour and is reserved for you. If you are unable to keep your appointment please call as soon as possible to reschedule.

> **Phone interview option:** If you live out of town or cannot conveniently come to our office you may choose to do your attorney interview by phone. Call for further information.

Attorney Interview: Your attorney will review your information, discuss it with you, answer your questions, and probably make some suggestions for you to consider. You will receive a fee agreement signed by you and the attorney detailing the cost of your estate plan.

Payment of fees: A retainer of <u>one-half the total fee</u> (minimum $250.00) is due at the end of your initial attorney interview. We accept MasterCard, Visa, Discover, and personal checks. The balance of the fee will be due when you sign your documents – usually within a few weeks after your initial attorney appointment.

Document review and approval: After your interview your attorney will prepare your documents and mail review copies to you to look over and approve.

Scheduling your signing time: Phone your document approval to our office and schedule your signing date. A signing schedule will be included with your review copies. Select the signing time that is most convenient for you.

Signing: Our office signings include the witnesses and a notary. Expect to receive additional information and instructions depending upon the estate plan you have selected. Office signings are conducted in group sessions, but none of your personal information will be discussed. Signing sessions last approximately one hour.

> **Out of office signing option:** You also have the option to sign your documents at a place of your choosing. After we have received your approval, we will mail the final documents to you along with detailed instructions. Call or email our office for further information about this service.

Call or email us anytime you have questions. We do not charge a fee for answering your questions while you are setting up your estate plan.

816.765.3900 Toll Free 800.248.8852 Fax 816.765.1689
avoidprobate@austinlivingtrust.com

ACQUAINTANCE FORM

All information will be held in strict confidence

Your name: ____
Last | First | Middle Initial | Date of Birth

Your marital status: ____________________ **Your Social Security No:** ____________________

Spouse's name: ____
Last | First | Middle Initial | Date of Birth

County you live in:____________________**Your Spouse's Social Security No:**____________________

At what address may we send mail to you?

____
Number and Street

____
City | State | Zip + 4 digit

Your home phone: ____________________**Your e-mail address:** ____________________
Area code

Your education: (Circle the highest number of years you have completed)

1 2 3 4 5 6 7 8	9 10 11 12	13 14 15 16	17 18 19 20
Grammar School	High School	College	Graduate School

Your work phone: ____________________ **Occupation:** ____________________
Area code

Your employer's name: ____

Spouse's work phone: ____________________ **Occupation:** ____________________
Area code

Spouse's employer name: ____

Do you have a family lawyer? YES NO **Have you ever used a lawyer before? YES NO**

What brought you to Austin Living Trust Law Firm?

- ❑ I am a previous Austin client
- ❑ I was referred by: ______________________________
- ❑ Mailing
- ❑ Newspaper
- ❑ Phone Book
- ❑ Radio
- ❑ Sign
- ❑ Television
- ❑ Other, please explain: ______________________________

CLIENT QUESTIONNAIRE

All information will be held in strict confidence

Please print or type. Use estimated figures and attach additional sheets if you need more space. If you can't conveniently photocopy your documents, bring the originals to your attorney interview. We'll make the copies we need and return your original documents to you.

Write your last name here ______________________________

YES	***NO***	
_____	_____	Are you a United States citizen?
_____	_____	Is your spouse a United States citizen?
_____	_____	Do you have a Will and/or Trust now? **If yes, bring a copy to your interview**
_____	_____	Are you custodian of property being held for a minor child under the Uniform Transfers To Minors Act?
_____	_____	Do you have a pre or post-nuptial agreement? **If yes, bring a copy to your interview**
_____	_____	Are you receiving or paying any child support or alimony (maintenance)? **If yes, bring a copy of this paperwork to your interview**
_____	_____	Do you own any Sub Chapter S stock?
_____	_____	Do you presently own or are you expecting to receive agricultural land?
_____	_____	Are you buying or selling real estate by contract for deed? **If yes, bring a copy to your interview**
_____	_____	Do you have a bank safe deposit box? Whose names are on it? ______________________________
_____	_____	Do you have a cemetery lot now?
		In whose name is it titled? ______________________________
		Cemetery Name ____________ City ____________ State ________
_____	_____	Does anyone owe you money? If so, how much do they owe you? $________________ **(a)** **Bring a copy of this paperwork to your interview**
_____	_____	Do you own real estate? (See notes below.)
		How many real estate properties (including your home) do you own?____
		What is the estimated gross value of all of your real estate? $________________ **(b)**

If you are setting up a Living Trust we will need copies of the following documents:

Deed – For each real estate property that you own by yourself or jointly owned by you and others. Also, include the real estate property tax bill/receipt for each property.

Probate Court Order – For any inherited real estate that you own by yourself or jointly owned by you and others.

Documents relating to any oil/gas leases, mineral rights, timeshare agreements, patents, copyrights, contract rights, etc., that you own by yourself or jointly owned by you and others.

List all **checking/money market accounts**:

Bank Name	Titled in whose name(s)	**Account Balance**
		$
		$
		$
Total		**$ (c)**

List all **savings accounts, CD's, etc.:**

Bank Name	Titled in whose name(s)	**Account Balance**
		$
		$
		$
Total		**$ (d)**

List all **stocks, bonds, treasury bills, etc.:**

Company Name	Titled in whose name(s)	**Value**
		$
		$
		$
Total		**$ (e)**

List all **IRA's, Keoghs, 401(k)'s, annuities, etc**.:

Company Name	Primary Beneficiary	Contingent Beneficiary	**Value**
			$
			$
			$
Total			**$ (f)**

List all **insurance (life or term) policy(s)** including employer policies:

Company Name	Primary Beneficiary	Contingent Beneficiary	**Death Benefit**
			$
			$
			$
Total			**$ (g)**

Estimated value of all your personal property (furniture, cars, boats, antiques, etc.) **$ (h)**
Estimated value of your livestock, crops, agricultural equipment, etc. **$ (i)**

TOTAL value of everything you and your spouse **OWN** (Add lines a thru i) **$ (j)**

TOTAL of everything you and your spouse **OWE** (mortgages, credit card balances, etc.) **-- $ (k)**

TOTAL ESTATE NET VALUE (subtract line k from line j) **$**

BASIC DECISIONS

All information will be held in strict confidence

Please list names as the person signs for legal documents (first, middle initial, last; first initial, middle name, last; etc). No nicknames.

My Trustees: Controls and manages your trust right now. Usually you and your spouse.

Name: ______________________ Name: ______________________

My Back-up Trustees: Take over at your incapacity or death. Usually adult children or trusted relative or friend.

#1 Choice: ______________________ #3 Choice: ______________________

#2 Choice: ______________________ #4 Choice: ______________________

Guardians for my Minor Children: Raises your children if you and your spouse become incapacitated or die.

#1 Choice: ______________________ #3 Choice: ______________________

#2 Choice: ______________________ #4 Choice: ______________________

Trustees for my Minor Children: Manages your children's inheritance. Can be the same person as their guardian.

#1 Choice: ______________________ #3 Choice: ______________________

#2 Choice: ______________________ #4 Choice: ______________________

My Health Care Agent: Authorized to make medical decisions if you are unable. Can be a different person than your trustees. Spouses usually name each other, but may choose different successor agents.

#1 Choice: ______________________ #3 Choice: ______________________

#2 Choice: ______________________ #4 Choice: ______________________

Additional decisions for you to consider:

Special Gifts: Do you want to give any specific items to a family member or other individual/organization?

Your Primary Beneficiaries: Who do you want to receive the rest of your estate after any special gifts have been made?

Alternative Beneficiaries: Who do you want to receive your estate if <u>all</u> of your primary beneficiaries are not alive at the time of your death?

Age of Distribution: Do you want your beneficiaries to receive their inheritance all at one time, or in installments at certain ages?

Dependents With Special Needs: Do you want provisions included to protect a special needs dependent?

Disinheriting: Is there any person you do <u>not</u> want to include in your estate?

Special Instructions: Do you have any special instructions to be included in your plan?

List any questions that you want to discuss with your attorney on a separate sheet and bring it with you to your attorney interview.