

Hickman & Lowder Co., L.P.A.
PLANNING QUESTIONNAIRE
 (MC Married)

I. PERSONAL

Your Name: _____ DOB: ____/____/____ SSN: _____-____-_____

Address: _____ Phone: (____) _____

Spouse: _____ DOB: ____/____/____ SSN: _____-____-_____

Date of marriage: ____/____/____ Have either of you been married before? YES NO

II. FAMILY

CHILDREN (if any are from a previous marriage, *please put a * next to the name*)

1. _____
 First Name MI Last Name Age Address, City, State, Zip

Spouse's name No. of Children Ages of Children Phone

2. _____
 First Name MI Last Name Age Address, City, State, Zip

Spouse's name No. of Children Ages of Children Phone

3. _____
 First Name MI Last Name Age Address, City, State, Zip

Spouse's name No. of Children Ages of Children Phone

4. _____
 First Name MI Last Name Age Address, City, State, Zip

Spouse's name No. of Children Ages of Children Phone

5. _____
 First Name MI Last Name Age Address, City, State, Zip

Spouse's name No. of Children Ages of Children Phone

6. _____
 First Name MI Last Name Age Address, City, State, Zip

Spouse's name No. of Children Ages of Children Phone

Have any of your or your spouse's children died? YES NO

Is any child or grandchild disabled, or need help in managing money? YES NO

REAL ESTATE

| Description/address | Value | How titled? (e.g., individually, both, right of survivorship?) |
|---------------------|----------|--|
| _____ | \$ _____ | _____ |
| _____ | \$ _____ | _____ |
| _____ | \$ _____ | _____ |

PERSONAL PROPERTY (e.g., motor vehicles, boats, and items of unusual value which might not be considered part of an average person's household or personal belongings)

| Description | Value | Owned by? |
|-------------|----------|-----------|
| _____ | \$ _____ | _____ |
| _____ | \$ _____ | _____ |
| _____ | \$ _____ | _____ |
| _____ | \$ _____ | _____ |

LIFE INSURANCE

| Company | Owner | Beneficiary | Face Amount* | Cash Value* |
|---------|-------|-------------|--------------|-------------|
| _____ | _____ | _____ | \$ _____ | \$ _____ |
| _____ | _____ | _____ | \$ _____ | \$ _____ |
| _____ | _____ | _____ | \$ _____ | \$ _____ |
| _____ | _____ | _____ | \$ _____ | \$ _____ |

*The "face amount" is the original amount of insurance when the policy was first issued. The "cash value" is what you would receive if you surrendered the policy today, and can usually be obtained by calling the insurance company or your insurance agent.

MONTHLY INCOME

| | You | Spouse | Former/current employer |
|-----------------|----------|----------|-------------------------|
| Social Security | \$ _____ | \$ _____ | _____ |
| Pension | \$ _____ | \$ _____ | _____ |
| Earned Income | \$ _____ | \$ _____ | _____ |
| Other | \$ _____ | \$ _____ | _____ |
| Total: | \$ _____ | \$ _____ | _____ |

LIABILITIES & DEBTS (e.g., mortgages, car loans, credit card, other debts)

| Description | Monthly Payment | Balance Due |
|-------------|-----------------|-------------|
| _____ | \$ _____ | \$ _____ |
| _____ | \$ _____ | \$ _____ |
| _____ | \$ _____ | \$ _____ |

MISCELLANEOUS

| | | |
|---|-----|----|
| Are both of you U.S. citizens? | YES | NO |
| Do either of you have any financial obligations that are not listed above? | YES | NO |
| Do either of you own or operate any business? | YES | NO |
| Do either of you expect to receive an inheritance other than from each other ? | YES | NO |
| Do either of you have any long-term care insurance? | YES | NO |
| Do either of you have a pre-nuptial or post-nuptial agreement? | YES | NO |
| Do either of you serve as power of attorney or guardian for anyone? | YES | NO |
| Have either of you established a Trust, or are either a beneficiary of a Trust? | YES | NO |
| Are either of you a veteran of the armed forces? | YES | NO |

If yes, provide branch and dates of induction & discharge: _____

| | | |
|---|-----|----|
| Do either of you have a prepaid funeral or cemetery plot? | YES | NO |
|---|-----|----|

If yes, name the funeral home/cemetery: _____

| | | |
|---|-----|----|
| Do you file federal income tax returns? | YES | NO |
|---|-----|----|

How many years of schooling did you/your spouse complete: You _____ Spouse _____

If you or your spouse have sold any major assets (house, car) in the past five years, describe what and when the asset was disposed of: _____

If you or your spouse have made any gifts (other than routine holiday and personal occasion gifts) during the past five years, describe the amount(s), date(s), and recipient of such gifts:

PROVIDE ANY ADDITIONAL INFORMATION YOU FEEL IS IMPORTANT:

By signing below, you authorize Hickman & Lowder Co., L.P.A. to discuss the above information with others as necessary to assist and advise you.

DATE: _____

Signature of person completing form