

ESTATE INFORMATION

Married or Single

Date of Preparation: _____

SECTION I

Full Legal Name: _____

Printed name used to sign documents _____

Nickname: _____ Date of Birth: _____

Home Address: _____ City: _____, State _____ Zip _____

Home Phone: _____ County of Residence: _____

Business Phone: _____ Employer _____

Business Address: _____ City: _____, State: _____ Zip _____

SECTION II *If Single please go to Section III*

Full Legal Name: _____

Printed name used to sign documents _____

Nickname: _____ Date of Birth: _____

Home Address: _____ City: _____, State _____ Zip _____

Home Phone: _____ County of Residence: _____

Business Phone: _____ Employer _____

Business Address: _____ City: _____, State: _____ Zip _____

SECTION III

Husband

Wife

I need a Will



I need a Living Will



I need a Durable Power of Attorney



SECTION IV

CHILDREN

Single Male or Husband's Children/Joint Children

Full Legal Names	Address	Date of Birth
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Single Women or Wife's Children (if different from above)

Full Legal Names	Address	Date of Birth
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

OTHER DEPENDENTS

(Friends or relatives dependant on you for all or part of their support)

Full Legal Names	Address	Date of Birth
_____	_____	_____
_____	_____	_____
_____	_____	_____

ADVISORS

Accountant: _____
Financial Advisor: _____
Insurance Advisor: _____
Primary Personal Bank: _____
Life Insurance Agent: _____
Stock Broker: _____
Referred to Our Firm By: _____

SECTION VII

Single Women or Wife's Check Sheet (Please check "Yes" or "No" for your answers)	Yes	No
Do any of your children have educational, medical, or physical needs?		
Do you have adopted children?		
Do you have a child with a learning disability?		
Are any of your children institutionalized?		
Are you or your spouse receiving social security or disability benefits?		
Do you wish to disinherit any of your children, grandchildren or other relatives? <div style="display: flex; justify-content: space-between;"> Names Relation </div> <hr style="width: 40%; margin-left: 0;"/> <hr style="width: 40%; margin-left: 0;"/> <hr style="width: 40%; margin-left: 0;"/>		
Have you been divorced?		
Are you making payments pursuant to a divorce or property settlement?		
Have you been Widowed? <div style="margin-left: 150px;">Date of Spouse's Death: _____</div> <div style="margin-left: 150px;">Place of Death: _____</div>		
Do you own real estate in any state other than Wyoming?		
Have you or your spouse ever filed federal gift tax returns?		
Have you or your spouse completed a previous will, trust, or estate planning?		
Did you or your spouse ever sign a pre- or post marriage contract?		
Do you own any shares in a Subchapter S Corporation?		
Are you expecting an inheritance from your parents or anyone else?		

SECTION VIII

Single Male or Husband's Check Sheet (Please check "Yes" or "No" for your answers)	Yes	No
Do any of your children have educational, medical, or physical needs?		
Do you have adopted children?		
Do you have a child with a learning disability?		
Are any of your children institutionalized?		
Are you or your spouse receiving social security or disability benefits?		
Do you wish to disinherit any of your children, grandchildren or other relatives? <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">Names</div> <div style="width: 45%;">Relation</div> </div> <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/>		
Have you been divorced?		
Are you making payments pursuant to a divorce or property settlement?		
Have you been Widowed? <div style="margin-left: 150px;">Date of Spouse's Death: _____</div> <div style="margin-left: 150px;">Place of Death: _____</div>		
Do you own real estate in any state other than Wyoming?		
Have you or your spouse ever filed federal gift tax returns?		
Have you or your spouse completed a previous will, trust, or estate planning?		
Did you or your spouse ever sign a pre- or post marriage contract?		
Do you own any shares in a Subchapter S Corporation?		
Are you expecting an inheritance from your parents or anyone else?		

SECTION VII SINGLE MALE OR HUSBAND'S REPRESENTATIVE LIST:

First Personal Representative (Name & Address) _____

Second Personal Representative (Name & Address) _____

Third Personal Representative (Name & Address) _____

If children are under 18 or disabled

First Guardian (Name & Address) _____

Second Guardian (Name & Address) _____

Single Male or Husband's Property List:

Real Property - Location: _____

Special division of property

1st _____

2nd _____

Personal Property:

SECTION VIII SINGLE WOMEN OR WIFE'S REPRESENTATIVE LIST:

First Personal Representative (Name & Address) _____

Second Personal Representative (Name & Address) _____

Third Personal Representative (Name & Address) _____

If children are under 18 or disabled

First Guardian (Name & Address) _____

Second Guardian (Name & Address) _____

Single Women or Wife's Request List:

Real Property - Location: _____

Special division of property

1st _____

2nd _____

Personal Property: