

SOMERS TAMBLYN / ISENHOUR BLECK

701 Pike Street, Suite 1510
Seattle, Washington 98101
(206) 340-2200

CONFIDENTIAL ESTATE PLANNING INFORMATION

Personal Information

Full name:

Birthdate:

Citizenship:

Home address:

Home telephone:

Email address:

Employer:

Office telephone:

Email:

Children

	<u>Name</u>	<u>Sex</u>	<u>Birthdate</u>	<u>Name of Other Parent</u>	<u>Married?</u>	<u># of children</u>
1.	<hr/>	<input type="checkbox"/> Male <input type="checkbox"/> Female	<hr/>	<hr/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<hr/>
2.	<hr/>	<input type="checkbox"/> Male <input type="checkbox"/> Female	<hr/>	<hr/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<hr/>
3.	<hr/>	<input type="checkbox"/> Male <input type="checkbox"/> Female	<hr/>	<hr/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<hr/>
4.	<hr/>	<input type="checkbox"/> Male <input type="checkbox"/> Female	<hr/>	<hr/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<hr/>
5.	<hr/>	<input type="checkbox"/> Male <input type="checkbox"/> Female	<hr/>	<hr/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<hr/>
6.	<hr/>	<input type="checkbox"/> Male <input type="checkbox"/> Female	<hr/>	<hr/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<hr/>

If you have minor children you will need to nominate a guardian and a trustee for any trust for the children.

Life Insurance

Number of policies:

Total face amount:

Total present cash value:

Primary beneficiary(ies):

Contingent beneficiary(ies):

Retirement Benefits

Employer Plans:

Type (pension, profit sharing, ESOP, 401(k), etc.)

Approximate balance(s):

Primary beneficiary(ies):

Contingent beneficiary(ies):

IRA:

Approximate balances(s):

Primary beneficiary(ies):

Contingent beneficiary(ies):

ASSETS AND LIABILITIES

A. **Assets**

Cash (checking and savings accounts)	\$	_____
Short-term investments (treasury bills, certificates of deposit, etc.)	\$	_____
Publicly traded securities and bonds	\$	_____
Annuities	\$	_____
Closely held securities	\$	_____
Principal residence	\$	_____
Vacation home	\$	_____
Other real estate	\$	_____
Partnerships*	\$	_____
Accounts receivable	\$	_____
Face amount of life insurance	\$	_____
Retirement benefits	\$	_____
Qualified plans	\$	_____
Non-qualified plans	\$	_____
Furnishings (including art and antiques)	\$	_____
Automobiles	\$	_____
Boats	\$	_____
Other (specify) _____	\$	_____
TOTAL ASSETS	\$	_____

B. **Liabilities**

Mortgage(s)	\$	_____
Credit Card Debt	\$	_____
Loans, notes, etc	\$	_____
Other obligations	\$	_____
TOTAL LIABILITIES	\$	_____
ASSETS – LIABILITIES = NET WORTH	\$	_____