RENARD LAW OFFICE, LLC CLIENT INFORMATION FORM

CLIENT NAME (1):				
(Include middle initi	als if you sign legal	documen	ts using the initial)	
CLIENT SPOUSE (2):				
*or Significant Other,	/Partner		*	
CLIENT ADDRESS:				
CLIENT E-MAIL:				_
CLIENT 2 E-MAIL:				_
CLIENT PHONE: CLIENT LANDLINE:			CLIENT 2 PHONE: _	
CLIENT 1:	Last four digits of	f SSN:		
CLIENT 2:	Last four digits of	f SSN:		
CLIENT 1:	DOB:			
CLIENT 2:	DOB:			
Only answer the fol	lowing question if	you are ha	ving a Prenuptial or	Marital Property
Agreement drafted	and if not, please s	skip to "Fa	mily Information" be	low:
If you are married, v	vere you previously	married?	YES NO	
If yes, name of prev	ious spouse(s):			
Divorce Date(s):		Death Date(s):		
(Add additional pag	je if necessary)			

Husband:

CHILDREN FROM PREVIOUS MARRIAGE(S)/RELATIONSHIPS:

NAME:

CHILD'S SPOUSE'S NAME:

OF CHILDREN:

MINOR OR ADULT?

Wife:

CHILDREN FROM PREVIOUS MARRIAGE(S)/RELATIONSHIPS:

NAME:

CHILD'S SPOUSE'S NAME:

OF CHILDREN: MINOR OR ADULT?

FAMILY INFORMATION:

I/We have no children from a previous marriage or relationship. These are our children:

CHILD'S NAME:

DOB:

ADDRESS and PHONE:

SPOUSE'S NAME:

GRANDCHILDREN: (NAMES AND DOB)

CHILD'S NAME:

(DOB IF MINOR):

ADDRESS and PHONE:

SPOUSE'S NAME:

GRANDCHILDREN: (NAMES AND DOB)

CHILD'S NAME:

(DOB IF MINOR)

ADDRESS and PHONE:

SPOUSE'S NAME:

GRANDCHILDREN: (NAMES AND DOB)

CHILD'S NAME:

(DOB IF MINOR)

ADDRESS and PHONE

SPOUSE'S NAME:

GRANDCHILDREN: (NAMES AND DOB)

(For additional children, please attach a page)

Are any children or grandchildren receiving governmental benefits (such as Medicaid, SSI, Katie

Beckett, etc.) or have a disability?

YES

NO

EXISTING ESTATE PLANNING DOCUMENTS

I/We have the following existing estate planning documer	nts: (CHECK AS APPROPRIATE)		
If yes, please provide their dates)			
WILL(S)	DATE SIGNED: DATE SIGNED: DATE SIGNED: DATE SIGNED:		
FINANCIAL POWER(S) OF ATTORNEY			
MEDICAL POWER(S) OF ATTORNEY/LIVING WILL			
REVOCABLE LIVING TRUST			
IRREVOCABLE TRUST			
MARITAL PROPERTY AGREEMENT	DATE SIGNED:		
I/We were residents of a state other than Wisconsin when	our estate planning documents were		
signed. YES NO (IF YES, WHAT STATE(S)?)			
WHAT ARE YOUR ESTATE PLANNING GOALS?			
ASSET INFORMATION	N		
CHECK AND CIRCLE WHICH APPLY: (NOTE: You do not it balances in any accounts)	need to provide amounts or current		
I/We bank at (names and branch locations [not fu	III address]):		
I/We own mutual funds/investment accounts that (names of funds ex: Ziegler, Vanguard, etc.):	t are NOT retirement accounts at		

	I/We own stock shares in certificate form	YES	NO				
	Name of Stock:						
	Year Acquired:						
	I/We own savings bonds	YES	NO				
	Type: EE E H OTHER						
	Have they matured? Y	Approximate	total amount?				
	I/We own the following retirement accounts (IRA, 4	101K, SEP, etc.):					
	I/We own Annuities as follows (name of company):						
	I/We own Life Insurance with these companies and	l in these face a	amounts:				
(Also i	indicate "T" for Term or "W" for whole life)						
	I/We own (or are part of) a: (CIRCLE IF APPLICAB	LE—IF APPLICA	BLE, PROVIDE NAME)				
Closel	ly-held company:						
S Corp	poration						
C Cor	poration						
Partne	ership or Family Limited Partnership						
Limited Liability Company (LLC)							
Farming Operation							
	I/We own a home	YES	NO				
If ves.	FMV per property tax bill: \$						

Tax Par	cel Number:
Do you	have an outstanding mortgage? YES NO
(If yes,	what is your approximate principal amount outstanding?)
Do you	have an outstanding home equity loan or line or credit? YES NO
Do you	have a copy of the Deed or Satisfaction of Mortgage (if fully paid)? YES NO
Do you	have Managed Forest Land? If yes, how many acres?
Do you	have water frontage? If yes, how many feet?
	I/We own real property (ex: vacation home, timeshare interest) out of State located in
	(STATE). If a Timeshare, do you have a Deed for the property? YES NO
,	I/We own real property (vacant land or otherwise) in Wisconsin. YES NO Is it titled jointly with anyone? If yes—with whom? Relationship to you?
	I/We own rental property YES (If yes, provide address/location): NO Is it titled jointly with anyone? If yes—with whom? Relationship to you?
	I/We have the following (CIRCLE AS APPROPRIATE):
	* ATV/UTV
	* MOTORCYCLE(S)
	* BOAT(S)
	* FIREARMS
	* VALUABLE COLLECTIONS
	I/We own the following vehicles: How are they titled? (sole or joint names)
	I/We rent a safe deposit box from our bank. YES NO
	If "Yes", which bank(s)?
	(If yes, do you have a joint owner designated on the box?)

I/We have a home safe	YES	NO	
(If yes, does at least one of your adult of	hildren/family	members know	where the key or

CONSIDERATIONS IN CREATING OR UPDATING YOUR ESTATE PLAN

what the combination is?)

- 1. Whom would you trust to act as your Financial Power of Attorney (POA) in the event of your disability? Whom would be the alternate or alternates? You can designate two people to act jointly, but each should be able to act independently of the other. Should they be compensated and if so, select a sum or money or an hourly amount. We will need their full names and addresses.
- 2. Whom would you trust to act as your Health Care Power of Attorney (HCPOA) in the event of your disability? You should choose someone who will be sufficiently assertive to communicate your health care or end of life decisions. Whom will you name as alternate or alternates? (You may only designate one, followed by one or more alternates.) We will need their full names, addresses, and telephone numbers.
- 3. We will need the full name and address of anyone you designate to act as your Personal Representative (PR) (formerly known as "Executor"). Select at least one alternate PR. (If you have trust provisions in either your Will or a Revocable Trust, whom will you name as Trustee? Two people can act together. Nominate at least one alternate.
- 4. Consider how you would like your estate to pass after your death (or, if you are married or in a long term relationship, after the death of the survivor). By way of example, to your children in equal shares. Consider if any of your children predecease you, would that share pass to their children, or to your surviving children ("beneficiary")? If your children (or grandchildren) are minors, you might want to provide those shares be held in Trust (which can be done within a Will, or in a Revocable Trust) and if so, consider the following:
 - What age(s) do you want the beneficiary to receive their share of the estate?

- Do you want to provide for periodic distributions of principal (Ex: 1/3 at age 22, ½ the balance at age 26, and full balance at age 28.)? You can provide for one distribution, or distribution in halves, thirds, quarters, etc.
- What expenses would you allow the Trustee to distribute principal for the beneficiary? (Ex: post high school education; down-payment on a home; purchasing a business; uninsurable medical conditions.)
- If the beneficiary dies before you (or the survivor of you), or after your death but while the funds are being held in trust, should that share pass to his or her children, or back to his or her surviving siblings? (Ex: to your great-grandchildren, or your other grandchildren?)
- If you have a disabled child receiving government benefits, a specific type of trust should be created called a "Supplemental Needs Trust" which protects interruption of their benefits. In that case you should consider where the money in that trust would pass if your disabled child (or grandchild) dies prematurely, or at his or her death.
- In the event of a "catastrophe" where none of your family survived (common accident or disaster leaving no living children, grandchildren, etc.), where do you want your estate to pass? Percentages?
- Do you want to provide that specific gifts or bequests be made upon your death (or the survivor's death) paid ahead of the other distributions? If so, in what sum or percentages?
- Are you excluding one or more adult children?
- 5. If you have a minor child or children, whom should be the Guardian? It is best to select only one Guardian, rather than a husband and wife together, because of the possibility of divorce. Name an alternate.
- 6. If you decide to establish a Revocable Trust, you need to answer these same questions. Your most important decision will be deciding whom should be the Trustee(s), with at least one alternate.
- 7. Are you expecting an inheritance from a mother, father, or other relative in the future?

PROBATE AVOIDANCE AND TAXES

- Probate can be avoided by any one of the following:
 - (i) Owning things jointly (Ex: husband and wife or ownership with adult child)
 - (ii) Adding Beneficiary Designations to your assets: Payable on Death "POD" for cash assets and Transfer on Death "TOD" for investments and real estate.
 - (iii) Establishing a Revocable Trust and "funding" the Trust during your lifetime.
- Currently, there are no death taxes, State or Federal, unless your assets total more than \$5.25 million (doubled for spouses). There is no inheritance tax.
- Inherited property is not taxable to the beneficiary (recipient) unless it includes taking distributions from a deceased person's IRA or other taxable retirement account, and in that event, it is subject to income tax.

Can we thank someone for referring you to us? (Please provide name and address (if known) or e-mail address because we send Thank you notes!)

NOTES/QUESTIONS FOR DISCUSSION