

Date: _____

Mignanelli & Associates, Ltd.

Attorneys at Law
10 Weybosset Street, Suite 400
Providence, RI 02903
(401) 455-3500
(401) 455-0648 FAX
Website: www.mignanelli.com

ESTATE PLANNING INFORMATION FORM

Family Information

Please include middle initials, any aliases, etc.

1. Full Name: _____
Date of Birth: _____
Place of Birth: _____
E-Mail Address: _____

2. Spouse/Partner
Full Name: _____
Date of Birth: _____
Place of Birth: _____
E-Mail Address: _____

3. Address: _____

Telephone: Home: _____ Office: _____
Cell: _____ Cell: _____

4. U.S. Citizen: Husband/Partner: Yes or No Wife/Partner: Yes or No

5. Children's
Full Name: Address: Telephone: Date of Birth: Marital Status:

6. Children's
Spouses:

7. Grandchildren:

8. Husband/Partner's:
Parents, Brothers, Sisters, Others (please identify relationship):

a.) _____ d.) _____

b.) _____ e.) _____

c.) _____ f.) _____

9. Wife/Partner's:
Parents, Brothers, Sisters, Others (please identify relationship):

a.) _____ d.) _____

b.) _____ e.) _____

c.) _____ f.) _____

10. Do you and/or your spouse/partner have an existing Will and Trust Agreement? If so, please describe:

11. If you have a burial plot and/or made arrangements for your funeral, please list information below:

12. Do you have a beneficiary that has special needs?

13. Are you or your spouse/partner the beneficiary of a trust that someone else created for your benefit?

14. Do you or your spouse/partner have a power of appointment under a trust that another person created for your benefit?

Fiduciary Information

Please include middle initials, any aliases, etc.

1. Choice of Executor/Co-Executor (please include full name, relationship and address):

2. Choice of Successor Executor/Co-Executor (please include full name, relationship and address):

3. Choice of Trustee/Co-Trustee (please include full name, relationship and address):

4. Choice of Successor Trustee/Co-Trustee (please include full name, relationship and address):

5. Choice of Guardian/Co-Guardian for minor children, if any (please include full name, relationship and address):

6. Choice of Successor Guardian/Co-Guardian for minor children, if any (please include full name, relationship and address):

7. Choice of Healthcare Power of Attorney and Alternate Agents (please include full name, relationship, address and telephone numbers):

Real Estate

Please use these descriptions in the TYPE column for your Real Estate assets.

Primary Residence Land Rental Home Commercial Property
 Second Residence Vacation Home Rental Property

Address	Type	Owner (Husband, Wife, Partner, Joint)	Asset Value

Bank Account

Please use these descriptions in the TYPE column for your Bank Account assets.

Checking CD
 Savings Money Market

Type	Bank/Credit Union Name	Owner (Husband, Wife, Partner, Joint)	Beneficiary	Asset Value

Insurance

Please use these descriptions in the TYPE column for your Insurance assets.

Term Policy Universal Life Policy
 Whole Life Policy Variable Life Policy

Type	Life Insurance Company Name	Owner (Husband, Wife, Partner, Joint)	Beneficiary	Death Benefit

Business

Please use these descriptions in the TYPE column for your Business assets.

General Partnership C Corporation Sole Proprietorship
 Ltd. Partnership (Bus.) S Corporation LLC

PLEASE NOTE IF THERE IS A BUY-SELL AGREEMENT IN EXISTENCE

Type	Business Name	Owner (Husband, Wife, Partner, Joint)	Asset Value

Other

Please use these descriptions in the TYPE column for your other assets.

Collectibles
Automobiles

Recreational
Miscellaneous

Probable Inheritance
Taxable Gifts

Powers of Attorney

Type	Description	Owner (Husband, Wife, Partner, Joint)	Asset Value

Retirement Income

Please use these descriptions in the TYPE column for your Pension assets.

Examples:

Social Security
Corporate Pension

Mandatory IRA Distributions
Annuity Income

Other

Type	Owner (Husband, Wife or Partner)	Monthly Amount

Liability

Please use these descriptions in the TYPE column for your Liability assets.

Mortgage

Other Loans

Personal Loan

Type	Description	Owner (Husband, Wife, Partner, Joint)	Asset Value

Electronic Access Information

It is important that you should compile a list of all of your electronic login and password information to be kept in a safe place where your family members can access them in case of emergency. Our office does not maintain any of this information.

GENERAL COMMENTS/SPECIAL REQUESTS

FOR OFFICE USE

PRIVACY NOTICE

Please take a moment to read the following important information about our privacy policy regarding the handling of your personal information. Protecting your privacy is very important to us.

As part of providing you with the legal services you have requested, we need to obtain pertinent personal information from you. That information includes, but may not be limited to, your address, date of birth, employment status, social security number, income, assets, account numbers, etc.

This information may be collected by telephone, in person, in writing, electronically via the internet or by any other means. It is with this information that we may fulfill and service your needs. We treat the information we gather about you in a confidential manner. The trust of our clients is one of our most valuable assets.

- Employees of Mignanelli & Associates, Ltd. having access to your personal information are instructed to use strict standards of care regarding the confidentiality of your personal information.
- We expect persons or organizations that provide services on our behalf to keep client information confidential, using it only to provide the services we have asked them to perform.
- We do not disclose personal information to anyone, except as may be required by law, or at your direction.

Should your relationship with us end, your personal information will remain protected in accordance with our confidentiality practices as outlined in this privacy notice.

Please feel free to call our office should you have any concerns or questions.

Thank you for your valued business.