

All information provided will remain confidential

ATTORNEYS AT LAW
 352-259-5011
 MCLINBURNSED.COM

Date: _____

I. Personal Information

Full Legal Name: _____

DOB: _____ SSN: _____

Are you married? Yes ___ No ___

If so, please provide your spouse's full legal name: _____

If so, do you have a Pre/Postnuptial Agreement? Yes ___ No ___ Date: _____

Home Address: _____

County: _____

Home Phone: _____ Cell Number: _____

Preferred E-mail Address: _____

Are you interested in receiving a periodic newsletter by e-mail? Yes ___ No ___

Are you a Florida Resident? Yes ___ No ___ Date established _____

Have you ever lived in a community property state? Yes ___ No ___

Do you own any property and/or assets in the following states: Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas, or Washington? Yes ___ No ___

Are you a United States Citizen? Yes ___ No ___ Details: _____

II. Funeral Arrangements. Please indicate which of the following should apply at your death and provide details as needed. If prearranged and/or prepaid, please indicate who through.

Burial ___ Cremation ___ Donate Organs ___ Prepaid ___ Prearranged ___

Details: _____

III. Children. please indicate the full name, date of birth, phone number, and address for each of your living **children**. Also list any **grandchildren** from each child. Please attach a separate list if more space is needed.

Child's Name	Address	Phone Number	Names of Child's Children
1.			
2.			
3.			
4.			
5.			

Do you have any predeceased children? Yes ___ No ___ If so, please list his/her name(s) and the names of his/her living children. _____

IV. Estate Planning Preferences. Please attach a separate list if more space is needed.

Briefly describe your preferred estate plan in your own words: _____

List any person(s) you think might attempt to **contest your will or trust**: _____

List any children, other family members, and other individuals you wish to **disinherit**: _____

Who will be the **executor/personal representative** of your estate? _____

Are you interested in avoiding probate by creating a **Revocable Living Trust**? Yes ___ No ___
If so, consider who you would like to serve as successor trustee(s) and list them below. You can select more than one person to serve either independently or jointly. _____

Are you interested in creating a **Durable Power of Attorney**? Yes ___ No ___
If so, consider who you would like to serve as your agent(s) and list them below. You can select more than one person to serve either independently or jointly. An agent will have the power to act on your behalf with respect to your property. _____

Are you interested in designating a **Health Care Surrogate**? Yes ___ No ___
If so, consider who you would like to serve as your surrogate(s) and list them below. You can select more than one person to serve either independently or jointly. A surrogate will act for you if you are unable to make medical decision on your own. _____

Are you interested in creating a **Living Will**? Yes ___ No ___
The Living Will is a statutory form, used to state your wishes regarding the use of life-sustaining measures.

How did you hear about us? _____

I hereby certify the information provided above is accurate and complete. I acknowledge the law firm McLin Burnsed, and its attorneys, will rely on the above information and if the data is not accurate, their recommendations may not be accurate.

Signature