



This Estate Planning Primer is designed by the attorneys at HSP, LLC to better understand you, your family, and the likely needs of your estate to help plan and prepare the best option for your legacy. Please take the time to complete this information with our office, or on your own and return it to our office, to get started with securing the peace of mind for your loved ones.

(Feel free to type out answers on separate document for ease and space)

BASIC INFORMATION

- 1) What is your full legal name, address, and date of birth?
a) _____
- 2) Are you currently married or in a domestic partnership? If yes, what is your spouse/partner's name?
a) _____
- 3) Do you have children or any dependents? If so, please provide their names and ages.
a) _____
- 4) Who are the people you wish to include, by name, as a beneficiary of your estate, other than your spouse/partner?
a) _____
- 5) Is there anything you think should be known about you, your spouse/partner, or a dependent/child regarding special needs care or long-term care needs, other than general end of life care?
a) _____

LAST WILL AND TESTAMENT

- 6) Who would you like to serve as the personal representative (executor) of your will?
a) _____
- 7) Do you intend to include any specific assets do you want to include in your will?
a) _____
- 8) How would you like your assets to be distributed among your beneficiaries?
a) _____

- 9) Are there any specific bequests you'd like to make (gifts to individuals or organizations)?
a) _____
- 10) Who will care for your minor children or dependents in the event of your death?
a) _____

LIVING REVOCABLE TRUST

- 11) Would you like to create any trusts for your children or other beneficiaries within your will?
a) _____
- 12) Do you want to create a revocable living trust? If so, what will be the name of the trust?
a) _____
- 13) Who do you want to appoint as the trustee of your living trust? Will there be a successor trustee?
a) _____
- 14) What assets do you intend to transfer into the living trust?
a) _____
- 15) How would you like the assets in the trust to be managed during your lifetime and distributed after your death?
a) _____
- 16) Are there particular conditions or instructions regarding the distribution of trust assets?
a) _____

LIVING WILL/HEALTHCARE POWER OF ATTORNEY/DURABLE POWER OF ATTORNEY FOR FINANCIAL NEEDS

- 17) Who do you want to name as your health care agent (the person who will make medical decisions on your behalf) please include name if spouse/partner?
a) _____

- 18) Are there specific medical treatments or interventions you want to refuse or accept?
a) _____
- 19) Do you want to include end-of-life care preferences in your health care power of attorney?
a) _____
- 20) Have you discussed your health care wishes with your designated agent?
a) _____
- 21) Who do you want to name as your “attorney in fact” for your durable power of attorney? (the person who will make financial/real estate decisions on your behalf) please include name if spouse/partner?
a) _____

REAL ESTATE, BUSINESS, ESTATE TAX

- 22) What real estate or property do you own that needs to be transferred?
a) _____
- 23) Who do you want to inherit your real estate or property?
a) _____
- 24) Are there any liens or mortgages on the property that need to be considered?
a) _____
- 25) Do you have any business interests or partnerships that need to be addressed in your estate plan?
a) _____
- 26) Do you believe your estate could have a total value greater than \$13.5 million?
a) _____

MISCELANEOUS ITEMS

- 27) Do you have any sentimental items or heirlooms that you want to pass on in a specific way?
a) _____

- 28) Are there specific charities, scholarships, or organizations that you would like to include in your estate plan?
a) _____
- 29) Do you have a financial planner that may need to be contacted about your estate plan? If so, please provide that person's name and contact information.
a) _____
- 30) Are there any family dynamics or potential disputes that we should be aware of while drafting your plan?
a) _____
- 31) Are there specific funeral or burial arrangements you wish to communicate?
a) _____
- 32) Do you have any outstanding debts or obligations that should be addressed in your estate planning?
a) _____
- 33) What additional information or documents do you have that may be relevant (e.g., previous estate plans, financial statements)?
a) _____
- 34) Please tell us anything you would like us to know that we have not already covered in the above questions.
a) _____

