



ROACH LAW

CHARLES S. ROACH
CROACH@CROACHLAW.COM

7855 S. EMERSON AVENUE, SUITE U
INDIANAPOLIS, INDIANA 46237

WWW.CROACHLAW.COM

(317) 888-7620
FACSIMILE (317) 608-6725

ESTATE PLANNING QUESTIONNAIRE

CHECK THE BOXES: Please let us know in the chart below what documents you would like us to prepare for you by checking the appropriate boxes. You are encouraged to review the FAQ at the end of this document before completing the questionnaire. There is also brief guidance provided at the beginning of each section.

SPOUSES: You may fill out only one questionnaire if you own all or most property jointly, or if you and your spouse agree on all provisions to include your documents, such that they are completely "reciprocal". You should fill out separate questionnaires if you have separate property or different wishes for passing on property to heirs, or if you wish to have separate documents prepared for any reason whatsoever.

FEE SCHEDULE: Although all attorneys have different fee schedules for preparation of these documents, we have attempted to keep costs relatively low for these services. This is done to ensure that everyone has the financial ability to create pre-planning documents consistent with their values and beliefs, and for the security of their family. The fees are listed below

WILL PACKAGE:

<u>DOCUMENT</u>	<u>INDIVIDUAL</u>	<u>HUSBAND AND WIFE</u>
(1) WILL	\$200 _____	\$300 _____
(2) POWER OF ATTORNEY	\$100 _____	\$150 _____
(3) HEALTH CARE POA	\$100 _____	\$150 _____
(4) LIVING WILL	\$100 _____	\$150 _____
TOTAL:	\$500 _____	\$750 _____
<i>PACKAGE DISCOUNT:</i>	<i>\$400</i> _____	<i>\$650</i> _____

SECTION A: GENERAL

I. Information About You:

Full Name: _____ Age: _____

Date of Birth: _____ Marital Status: _____

County of Residence: _____

Present Address: _____

Telephone No.: _____

Email Address: _____

II. Information About Your Spouse

Spouse's Full Name: _____ Age: _____

Date of Birth: _____

County of Residence: _____

Present Address: _____

Telephone No.: _____

Email Address: _____

III. Information About Your Children and Grandchildren

Number of minor children: _____ Number of adult children: _____

Please list the names and ages of your children (including dates of birth if a minor), and the names of any grandchildren (full names only). Attach additional pages as necessary.

	Child	Age	Date of Birth (if a minor)
1.	_____		
	Grandchildren: _____		
2.	_____		
	Grandchildren: _____		
3.	_____		

Grandchildren: _____

4. _____

Grandchildren: _____

IV. Your Assets

The first step in creating your estate plan (i.e., deciding who will receive your property, and how that will be accomplished), is to **list and understand how you own your property**. There are non-probate assets that transfer automatically to others (e.g., life insurance), and there are probate assets that pass according to your Last Will and Testament. For simplicity, we refer to probate assets as “Will Assets” and non-probate assets as “Automatic Assets”.

The second step is to organize your assets, which often times means **converting as many as possible into Automatic Assets**. This can be done by transferring property from its current ownership as a Will Asset, to an ownership that makes it an Automatic Asset. Examples include re-titling a home residence to joint ownership, completing “transfer on death” (TOD) forms at a bank so that your checking or saving account balance goes immediately to a designated person, or creating a living trust and transferring assets to it.

In Indiana, if the probate estate (meaning the total of all assets passing as Will Assets) of a deceased person is above \$50,000, a probate estate must be opened. Therefore, by law the will must be probated, which will ultimately pass the assets to your designated heirs. But it will take longer, be a public record accessible by anyone, and will usually require legal assistance (and fees) of a probate attorney.

Note that with careful estate planning, even wealthy individuals with substantial assets can structure their estate such that their probate (Will Assets) total less than \$50,000. For example, someone with a jointly owned house worth \$500,000, a 401k worth \$400,000, a TOD bank account worth \$150,000, and remaining probate assets of \$35,000 (clothes, dishes, furniture), would be able to proceed without a formal probate proceeding in Indiana, because their probate assets total only \$35,000.

* * * * *

Please list below (or on a separate sheet of paper) any significant assets that you own, along with approximate value, and how it is owned (sole or joint ownership). Also indicate whether the asset has a designated beneficiary (e.g., 401k, IRA, life insurance), or if you have executed a “transfer on death” (TOD) notice for that asset.

Your assets will include all real estate, significant personal property (cars, boats, motorcycles, valuable furniture, antiques, jewelry, heirlooms) and financial accounts (life insurance, brokerage accounts, 401k, IRA and other retirement accounts, bank accounts), and any other assets. You should also list any significant inheritances, settlements or other anticipated assets to which you may be entitled in the future.

Who do you wish to be named as guardian(s)? _____

Address: _____

Phone: _____

Email: _____

Alternate (optional)? _____

Address: _____

Phone: _____

Email: _____

3. Beneficiaries of Your Estate.

The gifts of property an individual makes in his or her will is probably the best known purpose of a will. It is important when considering these gifts that you understand the kinds of gifts which are possible. You can name an item specifically (e.g., "my grandfather's watch"), OR generally (e.g., "the sum of \$1,000"), OR in the residuary estate (e.g., "all of my remaining property").

Often, an individual will leave all property to his or her spouse. While this is certainly appropriate, the will should also provide for a "second contingency" in which his or her spouse is predeceased. In this event, if there are no minor children, the individual may choose to leave all property to his children, either through specific bequests to each of them, or through an instruction for them to divide all property equally and "share and share alike". In the event that there are minor children left, typically a testamentary trust is desired in which all property passes to a trust fund in which a trusted relative or friend manages the money until the children reach a designated age such as eighteen or twenty-one.

Please name the beneficiaries of your estate, and what they are to receive. Remember, if you name anyone who is a minor, you should name a trustee to oversee the property until the minor reaches at least the age of 18.

SECTION C: POWER OF ATTORNEY

(a) Who do you wish to name as your power of attorney: _____

Address: _____

Phone: _____

Email: _____

(b) Alternate (optional): _____

Address: _____

Phone: _____

Email: _____

SECTION D: **HEALTHCARE POWER OF ATTORNEY AND**
APPOINTMENT OF HEALTHCARE REPRESENTATIVE

(a) Who do you wish to name as your healthcare representative? _____

Address: _____

Phone: _____

Email: _____

(b) Alternate (optional): _____

Address: _____

Phone: _____

Email: _____

SECTION E: **LIVING WILL DECLARATION**

(1) Please indicate below your intentions regarding medical care:

_____ I would like my living will to state that my dying shall not be artificially prolonged in the event that such procedures would serve only to artificially prolong the dying process.

(2) Please indicate below your intentions with regard to *nutrition and hydration*:

_____ I wish to receive artificially supplied nutrition and hydration, even if the effort to sustain life is futile or excessively burdensome to me.

_____ I do not wish to receive artificially supplied nutrition and hydration, if the effort to sustain life is futile or excessively burdensome to me.

_____ I intentionally wish to make no decision concerning artificially supplied nutrition and hydration, leaving the decision to my health care representative or my attorney in fact with health care powers.

(3) Please indicate whether the Living Will or the Healthcare POA should take precedence:

_____ The Living Will shall take precedence.

_____ The HCPOA shall take precedence. My healthcare representative shall make the final decision.

PROCEDURES FOR SIGNING WILLS AND ESTATE DOCUMENTS

Typically, when the draft estate planning documents are approved, we have our clients sign the finalized documents in our office. However, the process is rather simple and can be conducted on your own. If you prefer to do so, please follow the below instructions carefully. Thanks again for allowing us to be of service.

1. Review and make sure your will (and/or other documents) are written exactly as you want them.
2. Invite two “disinterested” people to witness you signing the wills. Disinterested means any person who will not inherit anything in your will, and is not related to you in any manner such that the person could possibly inherit under any circumstances under the law (no nieces, nephews, cousins, etc.). Friends, neighbors, etc. are usually acceptable as long as unrelated.
3. If you do not know the witnesses personally, provide identification to them to verify your identify, matching the name on the will with name on the identification.
4. With witnesses present, initial at the bottom right corner of each page of the will (or POA, etc. as applicable). Sign full signature anywhere your full name appears on the signature line above it.
5. When complete, give to the witnesses for them to sign and put the appropriate information on the lines as indicated (phone number, address).
6. Make two copies of each fully signed document. Put the original in a lockbox, safe deposit box, or wherever you store important papers. Give one copy to a close family member who will keep it and let him/her also know the location of the original. Optional – send one copy back to our office for safekeeping.