

**ISENHOUR BLECK, P.L.L.C.**

1200 Fifth Avenue, Suite 2020  
Seattle, Washington 98101  
(206) 340-2200

**CONFIDENTIAL  
ESTATE PLANNING INFORMATION**

Personal Information

Husband

Wife

Full name:	_____	_____
Birth date:	_____	_____
Citizenship:	_____	_____
Social Security Number:	_____	_____
Home address:	_____	_____
Home telephone:	_____	_____
Email address:	_____	_____
Employer:	_____	_____
Office telephone:	_____	_____
Name of prior spouse (if any):	_____	_____
Dependents other than children:	_____	_____

Children

	<u>Name</u>	<u>Sex</u>	<u>Birthdate</u>	<u>Child only of</u>	<u>SSN</u>	<u>Married?</u>	<u>Number of Children</u>
1.	_____	<input type="checkbox"/> Male <input type="checkbox"/> Female	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
2.	_____	<input type="checkbox"/> Male <input type="checkbox"/> Female	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
3.	_____	<input type="checkbox"/> Male <input type="checkbox"/> Female	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
4.	_____	<input type="checkbox"/> Male <input type="checkbox"/> Female	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
5.	_____	<input type="checkbox"/> Male <input type="checkbox"/> Female	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
6.	_____	<input type="checkbox"/> Male <input type="checkbox"/> Female	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____

**If you have minor children you will need to nominate a guardian and a trustee for any trust for the children.**

Life Insurance

Husband Insured

Wife Insured

Number of policies:

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Total face amount:

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Total present cash value:

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Primary beneficiary(ies):

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Contingent beneficiary(ies):

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Retirement Benefits

Husband

Wife

Employer Plans:

Type (pension, profit sharing,  
ESOP, 401(k), etc.)

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Approximate balance(s):

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Primary beneficiary(ies):

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Contingent beneficiary(ies):

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IRA:

Approximate balances(s):

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Primary beneficiary(ies):

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Contingent beneficiary(ies):

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ASSETS AND LIABILITIES

A. <u>Assets</u>	Separate Property <u>Husband</u>	Separate Property <u>Wife</u>	Community <u>Property</u>
Cash (checking and savings accounts)	\$ _____	\$ _____	\$ _____
Short-term investments (treasury bills, certificates of deposit, etc.)	\$ _____	\$ _____	\$ _____
Publicly traded securities and bonds	\$ _____	\$ _____	\$ _____
Annuities	\$ _____	\$ _____	\$ _____
Closely held securities	\$ _____	\$ _____	\$ _____
Principal residence	\$ _____	\$ _____	\$ _____
Vacation home	\$ _____	\$ _____	\$ _____
Other real estate	\$ _____	\$ _____	\$ _____
Partnerships	\$ _____	\$ _____	\$ _____
Accounts receivable	\$ _____	\$ _____	\$ _____
Face amount of life insurance	\$ _____	\$ _____	\$ _____
Retirement benefits	\$ _____	\$ _____	\$ _____
Qualified plans	\$ _____	\$ _____	\$ _____
Non-qualified plans	\$ _____	\$ _____	\$ _____
Furnishings (including art and antiques)	\$ _____	\$ _____	\$ _____
Automobiles	\$ _____	\$ _____	\$ _____
Boats	\$ _____	\$ _____	\$ _____
Other (specify) _____	\$ _____	\$ _____	\$ _____
<b>TOTAL ASSETS</b>	<b>\$ _____</b>	<b>\$ _____</b>	<b>\$ _____</b>
B. <u>Liabilities</u>	Separate Property <u>Husband</u>	Separate Property <u>Wife</u>	Community <u>Property</u>
Mortgage(s)	\$ _____	\$ _____	\$ _____
Credit Card Debt	\$ _____	\$ _____	\$ _____
Loans, notes, etc.	\$ _____	\$ _____	\$ _____
Other obligations	\$ _____	\$ _____	\$ _____
<b>TOTAL LIABILITIES</b>	<b>\$ _____</b>	<b>\$ _____</b>	<b>\$ _____</b>
<b>ASSETS – LIABILITIES = NET WORTH</b>	<b>\$ _____</b>	<b>\$ _____</b>	<b>\$ _____</b>