

Estate Planning Questionnaire

(Unmarried Person)



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(Complete to the extent that information is available to you.)

_____ Date of Interview

_____ Interviewer

	<u>Name</u>	<u>Birthdate</u>	<u>Soc. Sec. No.</u>
Mother	_____	_____	_____
Father	_____	_____	_____
Child	_____	_____	_____
Child	_____	_____	_____
Child	_____	_____	_____
Child	_____	_____	_____
Grandchild	_____	_____	_____
Grandchild	_____	_____	_____
Grandchild	_____	_____	_____
Other relative	_____	_____	_____
Other relative	_____	_____	_____
Trusted persons	_____		
Prospective guardian (of minor children)	_____		
<u>Other Information</u>			
Primary residence address / when there _____			
Secondary residence address / when there _____			
Business address _____			
County of primary residence _____			
County of secondary residence _____			
Home telephone(s) _____		Home fax(es) _____	
Business telephone(s) _____		Business fax(es) _____	
Cell phone _____			
Home e-mail address(es) _____			
Bus. e-mail address(es) _____			
Citizenship _____			
Occupation _____			
Accountant _____		Life Ins. Agent _____	
Banker _____		Stockbroker _____	