

PERSONAL INFORMATION

ESTATE PLANNING

A. LARRY BERREN, ESQUIRE
THE BERREN LAW FIRM
197 TAUNTON AVENUE, SUITE 202
EAST PROVIDENCE, RI 02914

.....
(401) 437-4450
ALBERREN@BERRENLAW.COM
WWW.BERRENLAW.COM
.....

DATE: _____

PERSONAL INFORMATION

FULL LEGAL NAME: _____

YOUR NAME TO READ ON THE DOCUMENTS: _____

NICKNAME: _____ BIRTHDATE: _____ SOCIAL SECURITY NUMBER: _____

HOME ADDRESS: _____ CITY: _____

STATE: _____ ZIP: _____ COUNTY OF RESIDENCE: _____

HOME PHONE: _____ BUSINESS PHONE: _____ CELL PHONE: _____

EMAIL ADDRESS: _____

EMPLOYER: _____ POSITION: _____

MARRIED: DATE OF MARRIAGE _____ DOMESTIC PARTNERED DIVORCED WIDOWED SINGLE

SPOUSE'S OR PARTNER'S FULL LEGAL NAME: _____

SPOUSE'S OR PARTNER'S NAME TO READ ON THE DOCUMENTS: _____

NICKNAME: _____ BIRTHDATE: _____ SOCIAL SECURITY NUMBER: _____

HOME ADDRESS: _____ CITY: _____

STATE: _____ ZIP: _____ COUNTY OF RESIDENCE: _____

HOME PHONE: _____ BUSINESS PHONE: _____ CELL PHONE: _____

EMAIL ADDRESS: _____

EMPLOYER: _____ POSITION: _____

CHILDREN

NAME (USE FULL LEGAL NAME)	PARENT(S)	BIRTHDATE

OTHER DEPENDENTS

Friends or relatives who are dependents

NAME (USE FULL LEGAL NAME)	PARENT(S)

ADVISORS

	NAME	TELEPHONE
ATTORNEY		
ACCOUNTANT		
FINANCIAL ADVISOR		
LIFE INSURANCE AGENT		
STOCK BROKER		

IMPORTANT FAMILY QUESTIONS

PLEASE CHECK "YES" OR "NO" FOR YOUR ANSWER	YES	NO
DO YOU HAVE A CHILD WITH A LEARNING DISABILITY?		
DO ANY OF YOUR CHILDREN RECEIVE GOVERNMENTAL SUPPORT OR BENEFITS?		
DO YOU HAVE ADOPTED CHILDREN?		
DO ANY OF YOUR CHILDREN HAVE SPECIAL EDUCATIONAL, MEDICAL, OR PHYSICAL NEEDS?		
ARE ANY OF YOUR CHILDREN INSTITUTIONALIZED?		
ARE YOU OR YOUR SPOUSE RECEIVING SOCIAL SECURITY, DISABILITY, OR OTHER GOVERNMENTAL BENEFITS?		
DO YOU PROVIDE PRIMARY OR OTHER MAJOR FINANCIAL SUPPORT TO ADULT CHILDREN?		
HAVE EITHER YOU OR YOUR SPOUSE BEEN DIVORCED?		
ARE YOU MAKING PAYMENTS PURSUANT TO A DIVORCE OR PROPERTY SETTLEMENT AGREEMENT? (PLEASE FURNISH A COPY)		
HAVE YOU AND YOUR SPOUSE OR PARTNER EVER SIGNED A PRE- OR POST-MARRIAGE CONTRACT? (PLEASE FURNISH A COPY)		
HAVE YOU OR YOUR SPOUSE OR PARTNER BEEN WIDOWED? (IF A FEDERAL ESTATE TAX RETURN OR A STATE DEATH TAX RETURN WAS FILED, PLEASE FURNISH A COPY)		
IN WHAT STATES HAVE YOU LIVED WHILE MARRIED TO YOUR CURRENT SPOUSE OR PARTNER?		
DURING WHAT PERIODS OF TIME DID YOU RESIDE THERE? _____ TO _____	N/A	N/A
HAVE YOU OR YOUR SPOUSE OR YOUR PARTNER EVER FILED FEDERAL OR STATE GIFT TAX RETURNS? (PLEASE FURNISH COPIES OF THESE DOCUMENTS)		
HAVE YOU OR YOUR SPOUSE COMPLETED PREVIOUS WILL, TRUST, OR ESTATE PLANNING? (PLEASE FURNISH COPIES OF THESE DOCUMENTS)		
ARE BOTH YOU AND YOUR SPOUSE OR YOUR PARTNER UNITED STATES CITIZENS?		
IF YOU ANSWERED "NO," ARE EITHER YOU OR YOUR SPOUSE A RESIDENT OR A NONRESIDENT ALIEN?		

INSTRUCTIONS FOR COMPLETING THE PERSONAL INFORMATION CHECKLIST

GENERAL HEADINGS: This Personal Information Checklist is designed to help you list all the property you own, how it is titled, and what it is worth. You may own more property than can be listed on this checklist. If so, use extra sheets of paper to list your additional property.

TYPE: Immediately after the heading for each kind of property is a brief explanation of what property you should list under that heading.

EVIDENCE OF TITLE: This indicates the document or documents you will need as evidence of title to your property. Please understand that having these documents is essential in transferring property to your living trust. By collecting this documentation yourself, you will save substantial professional fees.

"OWNER" OF PROPERTY: How you own your property is extremely important for purposes of properly designing and implementing your living trust-centered plan. For each property category, there is a column titled "Owner."

CASH AND MONEY MARKET ACCOUNTS

TYPE: Checking Account "CA", Savings Account "SA", Certificates of Deposit "CD", Money Market "MM", (indicate type below).

EVIDENCE OF TITLE: Signature card or the document you signed to set up the account, recent account statement.

NAME OF INSTITUTION	TYPE	ACCOUNT NUMBER	OWNER	AMOUNT
				TOTAL:

Note: If Account is in your name (or your spouse's or partner's name) for the benefit of a minor, please specify and give minor's name.

NON-RETIREMENT BROKERAGE AND MUTUAL FUNDS

TYPE: Investment "I", Cash Management "CM", or other account that is in a street name (indicate type below).

EVIDENCE OF TITLE: A recent account statement.

BROKERAGE FIRM	TYPE	ACCOUNT NUMBER	OWNER	AMOUNT
				TOTAL:

STOCK CERTIFICATES

TYPE: Stock in publicly owned corporations which is stock traded on an exchange or over the counter. (Stock owned in family or nonpublicly traded companies should be listed under "Corporate Business and Professional Interests". Stocks held in street name, in a DRIP (Dividend Reinvestment) account, in a direct registration account, or in an account managed by a transfer agent (like Computershare), should be listed in the Section above, "Non-Retirement Brokerage and Mutual Funds".)

EVIDENCE OF TITLE: Stock certificate.

COMPANY	OWNER	NUMBER OF SHARES	FAIR MARKET VALUE
			TOTAL:

SAVING BONDS AND OTHER PAPER BONDS

TYPE: U.S. Savings Bonds, corporate, municipal, etc., (indicate type below).

EVIDENCE OF TITLE: Bond instrument and/or recent Treasury Direct account statement.

TYPE	OWNER	FACE VALUE
		TOTAL:

RETIREMENT PLANS

TYPE: Pension (P), Profit Sharing (PS), H.R. 10, IRA, SEP, 401(k), Qualified Annuities (QA) (indicate type below).

EVIDENCE OF TITLE: Summary plan description, documents you signed to set up the plan, account statement, beneficiary designation.

TYPE OF PLAN	EMPLOYER NAME (401K) OR ACCOUNT NUMBER (IRA)	BENEFICIARY UPON YOUR DEATH	VALUE
			TOTAL:

REAL PROPERTY

TYPE: Land, buildings, homes. Where you have either a deeded or land contract interest (land or buildings) that you own in partnership with someone else you should list those under the "Partnership Interests" section. If two or more names are on a deed or a contract that does not state the type of ownership, please use "?".

EVIDENCE OF TITLE: Deed or land contract (do not use mortgage or tax assessment).

GENERAL DESCRIPTION AND/OR ADDRESS	OWNER	FAIR MARKET VALUE	MORTGAGE
			TOTAL:

CORPORATE BUSINESS AND PROFESSIONAL INTERESTS

TYPE: Privately owned (nonpublicly traded) stock. (Please put a ✓ if Buy/Sell Agreement exists and, if stock is owned jointly with someone other than spouse, please furnish name and relationship.)

EVIDENCE OF TITLE: Articles of Incorporation, stock certificate, corporate minute book.

COMPANY NAME	NUMBER OF SHARES	BUY/SELL AGREEMENT	PERCENTAGE OF OWNERSHIP	OWNER	VALUE
					TOTAL:

LLC AND PARTNERSHIP INTERESTS

TYPE: LLCs, General Partnerships (GPs) and Limited Partnerships (LPs). Please put a ✓ under the type of company and state the percentage interest you have in the company.

EVIDENCE OF TITLE: LLC Articles of Organization, LLC Operating Agreement, Certificate of Partnership, Partnership Agreement, certificate of partnership, or any documents you signed when purchasing the partnership interest. Include any buy/sell agreements.

COMPANY NAME	LLC	GP	LP	PERCENTAGE OF OWNERSHIP	OWNER	VALUE
						TOTAL:

SOLE PROPRIETORSHIP BUSINESS AND PROFESSIONAL INTERESTS

TYPE: All of the assets used by you in a sole proprietorship type of business ownership.

EVIDENCE OF TITLE: Balance sheet, depreciation schedule, registration or title issued by your state, bills of sale, fictitious name or trade name affidavit. Since a sole proprietorship is an amalgamation of assets, each asset must have an evidence of title.

NAME OF BUSINESS	DESCRIPTION	OWNER	VALUE
			TOTAL:

MORTGAGES, NOTES, AND OTHER RECEIVABLES

TYPE: Mortgages or promissory notes payable to you; other monies owed to you.

EVIDENCE OF TITLE: Promissory note, written contract, or other documents creating right to receive payment.

NAME OF DEBTOR	DATE OF NOTE	DATE NOTE DUE	OWED TO	CURRENT BALANCE
				TOTAL:

LIFE INSURANCE POLICIES AND NON-QUALIFIED ANNUITIES

TYPE: Term, whole life, split dollar, group life, non-qualified annuity (indicate type of policy below. If a corporation or company owns the policy or pays the premium on the policy, write "Corporation").

EVIDENCE OF TITLE: The policy itself, including all endorsements and amendments, and the original application you signed.

COMPANY: _____

POLICY NUMBER: _____ TYPE: _____

INSURED: _____

PRIMARY BENEFICIARY: _____ SECONDARY BENEFICIARY _____

OWNER: _____ WHO PAYS PREMIUM: _____

FACE AMOUNT: _____ CASH VALUE: _____

AMOUNT OF LOANS ON POLICY: _____

COMPANY: _____
POLICY NUMBER: _____ TYPE: _____
INSURED: _____
PRIMARY BENEFICIARY: _____ SECONDARY BENEFICIARY _____
OWNER: _____ WHO PAYS PREMIUM: _____
FACE AMOUNT: _____ CASH VALUE: _____
AMOUNT OF LOANS ON POLICY: _____

COMPANY: _____
POLICY NUMBER: _____ TYPE: _____
INSURED: _____
PRIMARY BENEFICIARY: _____ SECONDARY BENEFICIARY _____
OWNER: _____ WHO PAYS PREMIUM: _____
FACE AMOUNT: _____ CASH VALUE: _____
AMOUNT OF LOANS ON POLICY: _____

COMPANY: _____
POLICY NUMBER: _____ TYPE: _____
INSURED: _____
PRIMARY BENEFICIARY: _____ SECONDARY BENEFICIARY _____
OWNER: _____ WHO PAYS PREMIUM: _____
FACE AMOUNT: _____ CASH VALUE: _____
AMOUNT OF LOANS ON POLICY: _____

COMPANY: _____
POLICY NUMBER: _____ TYPE: _____
INSURED: _____
PRIMARY BENEFICIARY: _____ SECONDARY BENEFICIARY _____
OWNER: _____ WHO PAYS PREMIUM: _____
FACE AMOUNT: _____ CASH VALUE: _____
AMOUNT OF LOANS ON POLICY: _____

COMPANY: _____
POLICY NUMBER: _____ TYPE: _____
INSURED: _____
PRIMARY BENEFICIARY: _____ SECONDARY BENEFICIARY _____
OWNER: _____ WHO PAYS PREMIUM: _____
FACE AMOUNT: _____ CASH VALUE: _____
AMOUNT OF LOANS ON POLICY: _____

PERSONAL EFFECTS

TYPE: Major personal effects such as motor vehicles, boats, jewelry, collections, antiques, furs, and all other valuable nonbusiness personal property (indicate type below and give a lump sum value for miscellaneous, less valuable items).

EVIDENCE OF TITLE: Registration or title issued by your state, bill of sale, receipt, canceled check, or source of cash to purchase property, gift tax return, or inheritance tax return if you received property by gift or inheritance.

TYPE	OWNER	VALUE
		TOTAL:

ANTICIPATED INHERITANCE, GIFT, OR LAWSUIT JUDGMENT

TYPE: Gifts or inheritances that you expect to receive at some time in the future; or monies that you anticipate receiving through a judgment in a lawsuit.

EVIDENCE OF TITLE: Copies of wills or trusts, copy of lawsuits or judgments, or any other document that evidences your anticipated interest.

DESCRIPTION
TOTAL ESTIMATED VALUE:

OTHER ASSETS

TYPE: Other property is any property that you have that does not fit into any listed category.

EVIDENCE OF TITLE: Documents you signed to purchase the property, documents you received when you received the property, or any other document you have that shows you own the property.

DESCRIPTION	OWNER	VALUE
		TOTAL:

SUMMARY OF VALUES

ASSETS	YOURS	SPOUSE'S OR PARTNER'S	JOINT
CASH AND MONEY MARKET ACCOUNTS			
NON-RETIREMENT BROKERAGE AND MUTUAL FUNDS			
STOCK CERTIFICATES			
SAVING BONDS AND OTHER PAPER BONDS			
RETIREMENT PLANS			
REAL PROPERTY			
CORPORATE BUSINESS AND PROFESSIONAL INTERESTS			
LLC AND PARTNERSHIP INTERESTS			
SOLE PROPRIETORSHIP BUSINESS AND PROFESSIONAL INTERESTS			
MORTGAGES, NOTES, AND OTHER RECEIVABLES			
LIFE INSURANCE POLICIES AND ANNUITIES			
PERSONAL EFFECTS			
ANTICIPATED INHERITANCE, GIFT, OR LAWSUIT JUDGMENT			
OTHER ASSETS			
TOTAL ASSETS			

LIABILITIES	YOURS	SPOUSE'S OR PARTNER'S	JOINT
LOAN PAYABLE			
ACCOUNTS PAYABLE			
REAL ESTATE MORTGAGES PAYABLE			
CONTINGENT LIABILITIES			
LOANS AGAINST LIFE INSURANCE			
UNPAID TAXES			
OTHER OBLIGATIONS:			
TOTAL LIABILITIES			

NET ESTATE			
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