


# Estate Plans That Work For You

*Our Mission Is To Preserve Your Legacy*



*embrace the responsibility*

*resolve to act*


*implement a plan*

*protect your family*

*preserve your assets*

*gain peace of mind*

**GANDELOT  
& ASSOCIATES**  
Counselors at Law



**GUIDING YOU**  
*through* Life's Journey

Estate Planning &  
Trust Administration

## Personal Information Form

### Gandelot & Associates

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**PERSONAL INFORMATION**

***CONFIDENTIAL***

FOR ESTATE PLANNING PURPOSES ONLY

**IMPORTANT**

We are required by law and the Michigan Rules of Professional Conduct adopted by the State of Michigan to keep confidential the personal and financial information you provide us in this form or otherwise, unless you authorize us to disclose it to other persons or organizations. We take this responsibility seriously, and exercise care to prevent our employees, associates and other whose services we use from disclosing or using your confidences.

If you are a married couple, by signing below, you waive any right to confidentiality between yourselves and authorize us to represent each of you and give us permission to disclose all information and communications to both of you.

It may be necessary for us to have and utilize this information for the purpose of consulting with you, creating and assisting you in funding your estate plan and also, at our discretion, to share certain information with other professional advisors, including accountants, financial advisors and institutions, investments and insurance brokers and health care professionals. By signing below, you authorize us to disclose your information to such other professionals on a “need to know” basis, except only any persons or organizations you name in the space below, as follows: (List, if any)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

IN ORDER FOR US TO CREATE AN EFFECTIVE ESTATE PLAN, IT IS NECESSARY THAT YOU LIST ALL OF YOUR ASSETS, INDICATE HOW THESE ASSETS ARE TITLED, AND ALL OF YOUR LIABILITIES. WE ASK THAT YOU BRING WITH YOU TO YOUR INITIAL CONFERENCE MEETING ALL DOCUMENTS RELATING TO YOUR ASSETS SO THAT WE CAN COPY THEM FOR OUR FILE FOR USE IN FUNDING YOUR ESTATE PLAN.

BY SIGNING BELOW, YOU ARE INDICATING THAT YOU HAVE DISCLOSED ALL OF YOUR ASSETS AND LIABILITIES IN THIS PERSONAL INFORMATION FORM AND AUTHORIZE US TO UTILIZE AND DISCLOSE SUCH INFORMATION FOR ESTATE PLANNING PURPOSES AS STATED AND LIMITED ABOVE.

Date: \_\_\_\_\_

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Client Signature

# Getting Started on a Plan for your Family and Property with Gandelot & Associates

As a firm, we take pride in tailoring our services to our client's individual needs. We customize each Estate Plan and take extraordinary measures to ensure that each client's plan will perform as designed. Our unique "Estate Maintenance Program" gives clients the opportunity to annually review their planning objectives, the value of their estate and how changes in family situations and tax laws may impact their Estate Plan.

We help to educate many of our clients about the variety of techniques that can *reduce* estate taxes, maximize retirement assets, *increase* wealth transferred to future generations and leave a *legacy* to loved ones and charitable organizations.



Just as each client has specific estate planning needs, so do those faced with administering wills and trusts. We are here for you during the probate and trust administration phase and are prepared to handle any litigation that might arise. No matter where in life's journey you are, we will guide you and help you realize your hopes, dreams and objectives.

## Our Planning Process

1. Review and complete the **Eight Steps** contained in this booklet.
2. Attend an **Initial Conference** (usually lasting 1 ½ -2 hours): At the Initial Conference we will get to know each other. You can teach us about you, your loved ones, your goals and desires, as well as your concerns. In turn, we will teach you about the law and the many options available to you in planning your estate.
3. Review and approve of our recommendations in a **Design Conference** (if necessary): With your help and input, together we will design a plan that is tailored to your individual situation. We will help you decide which individuals/institutions will assist you and your loved ones in the event of your death or disability. We will work with you and your advisors to ensure that the plan will function as it is intended.
4. Review and execute your Estate Plan at a **Signing Conference**: When your documents are prepared and ready to be signed, we will carefully review each of the estate planning documents with you to make certain they meet with your approval. Once you have agreed that the documents reflect your desires, we will have you sign them. We will then give you and your financial advisors detailed instructions for titling the assets in the name of your living trust.
5. Review trust funding in the **Funding Follow-up Meeting**: In order for a living trust-centered estate plan to work as it is intended, your assets must be properly titled into the name of the Living Trust. This process is called "funding". At the Funding Follow-up Meeting, we review the progress toward completing the funding of the assets.

<b>STEP 1</b>	<p><b>Simple Background Information</b></p> <p>The information you list in this section provides us with important objective information about you, your age, marital status, where you live, and how best to communicate with you.</p>
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**Husband's Information**

Full Name \_\_\_\_\_

AKA \_\_\_\_\_ Nickname \_\_\_\_\_

Birth date \_\_\_\_\_ SS# \_\_\_\_\_

Birthplace \_\_\_\_\_ Ancestry \_\_\_\_\_

Father's Name \_\_\_\_\_ Mother's Maiden Name \_\_\_\_\_

Home Address \_\_\_\_\_

City/State/ZIP \_\_\_\_\_ County \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Employer \_\_\_\_\_ Work Phone \_\_\_\_\_

Email address \_\_\_\_\_

US Citizen?    Yes            No

Veteran?        Yes            No

Have you ever lived in any of the following states: Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas, Washington or Wisconsin?    Yes            No

Are any of your parents still living?    Yes            No

Are any of your grandparents still living?    Yes            No

Have you been married previously?    Yes            No

<b>STEP 1</b>	<b>Simple Background Information (continued)</b>
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**Wife's Information**

Full Name \_\_\_\_\_

AKA \_\_\_\_\_ Nickname \_\_\_\_\_

Birth date \_\_\_\_\_ SS# \_\_\_\_\_

Birthplace \_\_\_\_\_ Ancestry \_\_\_\_\_

Father's Name \_\_\_\_\_ Mother's Maiden Name \_\_\_\_\_

Home address \_\_\_\_\_

City/State/ZIP \_\_\_\_\_ County \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Employer \_\_\_\_\_ Work Phone \_\_\_\_\_

Email address \_\_\_\_\_

US Citizen?    Yes            No

Veteran?        Yes            No

Have you ever lived in any of the following states: Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas, Washington or Wisconsin?            Yes            No

Are any of your parents still living?            Yes            No

Are any of your grandparents still living?            Yes            No

Have you been married previously?            Yes            No

**Your Marriage**

Date of Marriage \_\_\_\_\_ Existing Prenup? \_\_\_\_\_

<b>STEP 2</b>	<p><b>Potential Individual Beneficiaries</b></p> <p>Identify those children and/or other family members who are most likely a possible beneficiary of your estate. Listing a person in this section is not a firm indication of your decision to provide for a particular individual. Rather, it is simply a means of identifying individuals for discussion purposes. <i>Note: Under "Relationship" for children use "JT" if both spouses are the parents, "H" if the husband is the parent, and "W" if the wife is the parent.</i></p>
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Name/Address/Telephone Number	Birth date	Relationship
1. _____ _____	_____	_____
2. _____ _____	_____	_____
3. _____ _____	_____	_____
4. _____ _____	_____	_____
5. _____ _____	_____	_____
6. _____ _____	_____	_____

Does any potential beneficiary have special educational, medical or physical needs, or receive governmental benefits?	Yes	No
Does any potential beneficiary have any potential problems with drug or alcohol abuse?	Yes	No
Are you concerned with any potential beneficiary's ability to handle/manage money?	Yes	No
Are you concerned with your children's ability to get along with one another?	Yes	No
Are their problems/concerns relative to your relationship with your children?	Yes	No
Have any of your children been divorced?	Yes	No

<b>STEP 3</b>	<p><b>Potential Charitable Beneficiaries</b></p> <p>Many, but not all, of our clients desire to direct a portion of their estate toward charities or other non-profit organizations. Whether it is your church, college, social club, favorite philanthropy, you may have the same desires. Take a moment and contemplate whether you would ever include such a bequest within your Estate Plan.</p>
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Name of Charity or Non-Profit Organization	Address
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

<b>STEP 4</b>	<p><b>People Who Advise You</b></p> <p>Your various advisors play a key role in the establishment of your Estate Plan. By way of example, your financial advisor and life insurance agent may need to be contacted to confirm and/or change beneficiary designations and titling of the accounts.</p>
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Name/Address	Telephone
1. _____ _____	_____
2. _____ _____	_____
3. _____ _____	_____
4. _____ _____	_____
5. _____ _____	_____
6. _____ _____	_____

<b>STEP 5</b>	<p><b>Concerns and Anxieties</b></p> <p>Our objective is to assist our clients in identifying their concerns and anxieties. All too often in the planning process, a client will discover that there are other, more pressing concerns than the one that caused them to begin the planning process. Please review the following risks that we frequently hear from clients and identify those risks of which you are concerned.</p>
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	Level of Concern Low – High (if any)			
	None	L	M	H
<b>Tax Concerns</b>				
Risk of the IRS “inheriting” a portion of the estate when we die	_____	_____	_____	_____
Risk of capital gains taxes paid on the sale of property	_____	_____	_____	_____
Risk of unnecessary income taxes being paid on investment assets	_____	_____	_____	_____
<b>Family Concerns</b>				
Risk of persons other than those we select will gain custody of any minor children	_____	_____	_____	_____
Risk of a child or other beneficiary losing his or her inheritance to creditors, lawsuits or to a divorcing spouse	_____	_____	_____	_____
Risk of a child or other beneficiary losing his or her inheritance due to mismanagement of the money	_____	_____	_____	_____
Risk that upon the death of a child or other beneficiary, any inheritance received by that person might pass to a spouse (who may later remarry) rather than passing to a grandchild or other preferred heir	_____	_____	_____	_____
Risk that an inheritance passing to a minor child or grandchild might be squandered or stolen by the person in charge of managing the money for that child or grandchild	_____	_____	_____	_____
Risk that an inheritance received by a child or other beneficiary who has a disability would render them ineligible for governmental benefits	_____	_____	_____	_____
Risk that assets left to your spouse (whether by virtue of joint tenancy or by will) might not pass to your intended heirs as a result of your spouse remarrying	_____	_____	_____	_____
Risk of unnecessary litigation from heirs who receive less than they think they are entitled to	_____	_____	_____	_____



<b>STEP 5</b>	<b>Concerns and Anxieties (continued)</b>
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	Level of Concern Low – High (if any)			
	None	L	M	H
Risk of estate passing unequally due to nature of assets owned, such as where a business comprises most of the value of the estate	_____	_____	_____	_____
Risk that heirs will not fully appreciate the values and virtues used to create the inheritance	_____	_____	_____	_____
Risk that parents, who may need financial assistance, are not provided for	_____	_____	_____	_____
<b>Disability Concerns</b>				
Risk of loss of control over assets in the event of disability	_____	_____	_____	_____
Risk of legal guardianship in the event of disability	_____	_____	_____	_____
Risk of unwanted efforts made to save my life if I feel that it's best to cease such efforts and die peaceably and without pain	_____	_____	_____	_____
Risk that health care personnel will not disclose health care information to loved ones due to the lack of proper HIPAA releases	_____	_____	_____	_____
Risk of unnecessary guardianship over an incapacitated adult child in order to make health care decisions for that child	_____	_____	_____	_____
<b>Creditor Concerns</b>				
Risk of frivolous lawsuits	_____	_____	_____	_____
Risk of loss of assets to nursing home	_____	_____	_____	_____
Risk that a creditor of a joint tenant may seize the jointly-owned property to satisfy the debt of the other joint tenant	_____	_____	_____	_____
<b>Post-Death Concerns</b>				
Risk of unnecessary costs and delays associated with the estate passing through probate	_____	_____	_____	_____
Risk of having to sell assets in a “fire sale” in order to create the liquidity needed to pay taxes and expenses	_____	_____	_____	_____

<b>STEP 5</b>	<b>Concerns and Anxieties (continued)</b>
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	Level of Concern Low – High (if any)			
	None	L	M	H
Risk that the person(s) charged with managing your affairs after you've passed away will innocently make mistakes because he or she is unaware of what is required and is unaware of the personal liability for those mistakes	_____	_____	_____	_____
Risk of private matters unnecessarily being made public	_____	_____	_____	_____
<b>Business Concerns</b>	_____	_____	_____	_____
Risk that corporate shield will fail to protect corporate assets because corporate meetings have not been held annually, corporate minutes kept, officers elected, etc.	_____	_____	_____	_____
Risk of lawsuits by employees due to out-of-date or non-existent employee agreements	_____	_____	_____	_____
Risk of business failure due to the lack of a business succession plan	_____	_____	_____	_____
Risk of unnecessary expenses associated with the sale of a business because of the absence of an exit plan having been prepared ahead of time	_____	_____	_____	_____
Risk of unintended financial results stemming from a Buy/Sell Agreement that is out of date and/or underfunded	_____	_____	_____	_____

**STEP  
6**

**Appointments – People to Assist You**

One of the most important aspects of any Estate Plan is the “appointment” of various individuals to assist you and your family in times of need, particularly when death or disability strikes.

**Successor to You and Your Spouse**

Who will serve as Guardian of your minor children (if any)?

		<b>Husband’s Responses</b>	<b>Wife’s Responses</b>
<b>Guardians</b>	First Choice	_____	_____
	Second Choice	_____	_____

If you are incapacitated for any period of time, who would you choose to handle your financial affairs?

		<b>Husband’s Responses</b>	<b>Wife’s Responses</b>
<b>Financial Power of Attorney</b>	First Choice	_____	_____
	Second Choice	_____	_____
	Third Choice	_____	_____

If you are (both) incapacitated for any period of time, who would you choose to make health care decisions for you?

		<b>Husband’s Responses</b>	<b>Telephone Number (Home/Cell)</b>	
<b>Health Care Contact</b>	First Choice	_____	_____	
	Second Choice	_____	_____	
	Third Choice	_____	_____	
			<b>Wife’s Responses</b>	
	First Choice	_____	_____	
	Second Choice	_____	_____	
	Third Choice	_____	_____	

If you are (both) deceased, who would you choose to administer and distribute your estate?

		<b>Husband’s Responses</b>	<b>Wife’s Responses</b>
<b>Successor Trustees</b>	First Choice	_____	_____
	Second Choice	_____	_____
	Third Choice	_____	_____

<b>STEP 7</b>	<p><b>Asset Management</b></p> <p>Determining the ownership, value and character of your assets is important to your Estate Plan. The title “ownership” is important for tax and transfer matters. The “value” will be significant in determining potential tax liability. The “character” is relevant in assessing the manner by which the asset can transfer.</p>
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**Bank and Savings Accounts (Checking, Savings and Certificate of Deposit)**

	Financial Institution	Account # and Type	Owner(s)	Market Value
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____

**Investment Accounts, Stocks and Bonds**

	Financial Institution	Account # and Type	Owner(s)	Market Value
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____

**Retirement Accounts (Pension, Profit Sharing, IRA, 401(k), 403(b), H.R. 10)**

	Financial Institution	Account # and Type	Participant	Market Value
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____

<b>STEP 7</b>	<b>Asset Management (continued)</b>
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**Life Insurance Policies and Annuities (Term, whole life, split dollar, group life, or annuity)**

	Insurance Company	Policy # and Type	Insured	Death Benefit
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____

**Other Assets (Business Interests, Corporations, LLCs and any potential inheritances)**

	Description	Owner(s)	Market Value
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____

**Personal Effects (Motor Vehicles, Boats and Jewelry)**

	Description	Owner(s)	Market Value
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____

**Real Estate (Deeds or land contract)**

	Description	Owner(s)	Market Value
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____

## Additional Documentation

**General Document Request.** In some instances, it is necessary for us to review other documents before we can make planning recommendations. If possible, please bring with you to the initial interview the following documentation:

- Copies of existing planning documents, including wills, trusts, financial powers of attorney, health care powers of attorney, living wills, etc.
- Copies of all deeds to real estate you own.
- Copies of the most recent statements evidencing your ownership of bank accounts, investment accounts, retirement accounts, and annuities.
- Prenuptial Agreements (if any).
- Long-term care insurance policies (if any).
- Divorce decree or property settlement agreements for divorce under which continued obligations exist.

<b>STEP 8</b>	<b>About Your Goals and Objectives</b>  Before we meet, it is important for us to better understand what prompted you to schedule this appointment. Don't focus on the tools to be used, but rather on the outcomes to be achieved.
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### About Your Goals and Objectives

Goal	Consequences if Goal isn't accomplished
1. _____ _____	_____ _____
2. _____ _____	_____ _____
3. _____ _____	_____ _____
4. _____ _____	_____ _____
5. _____ _____	_____ _____
6. _____ _____	_____ _____