



LAW OFFICE OF JULIA RICE

Estate Planning & Administration
 www.juliaricelaw.com

Office Locations:

1011 LIBERTY ST. SE, SALEM, OR 97302
 5200 SW MEADOWS RD., STE. 150, LAKE OSWEGO, OR 97035

 julia@juliaricelaw.com ~ Mailing Address: P.O. Box 442, Lake Oswego, Oregon 97034 ~ (503) 726-5990

PERSONAL INFORMATION FORM

(Confidential - To Be Completed by Client)

Date _____

Decedent’s Information

Name: _____
 First Middle Last

Final Address: _____
 Street City State Zip

Birth Date: _____ **Occupation and Name of Employer:** _____

Date of Death: _____ **Social Security Number:** _____

Previously Married? [] Yes [] No **If Yes:** [] Widowed [] Divorced **Veteran?** [] Yes [] No

Trustee’s Information

Name: _____
 First Middle Last

Address: _____
 Street City State Zip

Phone: _____ (cell) _____ (home)

Email Address: _____ **Communication Preference:** Email/Cell/Home

Referral Source: Website/Social Media/Presentation/Personal Referral (include name) _____



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Children:

Furnish any additional information on an attached paper.

Child [1]: _____
First Middle Last

Address: _____
Street City State Zip

Phone: _____ (cell) _____ (home)

Email Address: _____ **Birth Date:** _____

Child [2]: _____
First Middle Last

Address: _____
Street City State Zip

Phone: _____ (cell) _____ (home)

Email Address: _____ **Birth Date:** _____

Child [3]: _____
First Middle Last

Address: _____
Street City State Zip

Phone: _____ (cell) _____ (home)

Email Address: _____ **Birth Date:** _____

Decedent's Professional Advisors

Accountant: _____
Name Firm

Financial Planner: _____
Name Firm



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Miscellaneous

1. What size is the decedent's estate, approximately?

- [] Under \$1,000,000
[] \$1,000,001 - \$3,000,000
[] \$3,000,001 - \$6,500,000
[] More than \$6,500,000

2. Do any beneficiaries have special needs or receive government assistance? [] Yes [] No

If yes, please provide additional information:

3. History of Gifts: List all gifts the decedent made in excess of \$10,000 and all gifts of life insurance.

Date of Gift Donor Recipient Value Reason for Gift

4. Has the decedent ever filed a gift tax return? [] Yes [] No

Summary of Decedent's Assets

Please provide the most recent statement, the company name, and the approximate value for the following assets:

1. Bank Accounts

Blank lines for bank account information

2. Brokerage/Stock Accounts

Blank lines for brokerage/stock account information

3. Certificates of Deposit

Blank lines for certificates of deposit information

4. Real Property (please provide address and county)

Blank lines for real property information



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5. 401(k)/IRAs (include beneficiary designations)

6. Pension/Additional Retirement Accounts (include beneficiary designations)

7. Life Insurance (include beneficiary designations)

8. Safe Deposit Box

9. Personal Property

10. Please provide a copy of the following documents, if executed by decedent:

- A will
- A revocable living trust
- Any irrevocable trust
- A prenuptial agreement