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Attorneys At Law

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(Please Print)

HUSBAND			
Social Security No	Date		
Your Name			
(First)	(Middle)	(Last)	
Home Address			
(Street)	(City)	(State)	(Zip Code)
Home Phone	Fax		
Cell Phone	Preferred Email Address		
Date of Birth	Place of Birth		
Are you a citizen of the United States	s? If no, citizenship		
Condition of Health			
Employer	Position		
Business Address			
(Street)	(City)	(State)	(Zip Code)
Business Phone	Business Fax		
WIFE			
Social Security No	Date		
Your Name			
(First)	(Middle)	(Last)	
Cell Phone	Preferred Email Address		
Date of Birth	Place of Birth		
Are you a citizen of the United States	s? If no, citizenship		
Condition of Health			
Employer	Position		
Business Address			
(Street)	(City)	(State)	(Zip Code)
Business Phone	Business Fax		

If either Husband or Wife has been married before, please furnish the following information as to each prior marriage below: (1) name of former spouse, (2) time and place of the marriage, (3) place, date, and cause (death, divorce, etc.) of termination of the marriage. (Use reverse side of sheet if necessary.)

FINANCIAL INFORMATION

<u>ASSETS</u> (indicate if any assets are held as separate property of either spouse ("SPH" or "SPW"), as joint tenants with rights of survivorship ("JTWROS") or in payable on death accounts ("POD"))

1.	Average cash balance		
	(including savings, certificates of deposit and othe	er cash equivalents)	\$
2.	Bonds (detail on separate listing)	\$	
3.	Stocks (detail on separate listing)		\$
4.	Business Interests (detail on separate listing)		\$
5.	Residence Value	\$	
	Less Mortgage	\$	
	Real Equity		\$
6	Other Real Estate (describe)		·
0.	Value	\$	
	Loss Mader	•	
	Less Mortgage	\$	
	Real Equity		\$
	Value	\$	
	Less Mortgage	\$	
	Real Equity		\$
	Value	¢	
	value	\$	
	Less Mortgage	\$	
	Real Equity		\$
7.	Autos, Boats or Planes	•	

Value \$_____

Less Loan Amount	\$
Real Equity	\$
Value	\$
Less Loan Amount	\$
Real Equity	\$
Value	\$
Less Loan Amount	\$
Real Equity	\$

ASSETS (Continued)

8. Livestock

9.	Other assets,	including furnishings
	of the house.	notes receivable etc.

 \$	
 \$	
 \$	
\$	

(Place an asterisk (*) by any debt or mortgage which is covered by credit life insurance.)

10. (a) Life Insurance on Husband's life

						Amount of
Insurance						Accidental
Company and		Face Amount	Date of	Pres	sent Beneficiary	Death
Policy No.	Owner	of Policy	Issue	Primary Primary	<u>Contingent</u>	Provisions

(b) Life Insurance on Wife's life.

\$_____

Insurance						Accidental
Company and		Face Amount	Date of	Pres	sent Beneficiary	Death
Policy No.	Owner	of Policy	Issue	Primary	<u>Contingent</u>	Provisions

LIABILITIES

1.	Average accounts payable (including monthly b	ills)	\$
2.	Any loans or debts other than those		
	mortgages shown above - (describe)		
			\$
			\$
			\$

(Place an asterisk (*) by any debt or mortgage which is covered by credit life insurance.)

INCOME, INCLUDING DEFERRED INCOME AND COMPENSATION

Husband's salary	\$	_/year
Mile's colory	¢	(
Wife's salary	\$	_/year
Any income in excess of Husband and Wife's		
salaries - (describe source(s))		
	\$	-
	\$	-

List any benefits to which Husband or Wife are entitled or will be entitled. Mark Husband's benefits "H" and mark Wife's benefits "W". (Examples: Pension Plan, Thrift Plan, etc.)

		Present and Contingent
	Value, if known	Beneficiaries
 Pension Plan	\$	
 Thrift Plan	\$	
 Profit-Sharing Plan	\$	

Other (describe) - such as Government	
Disability, Retirement Pay, Teacher's	
Retirement, Individual Retirement	
Account, 401(k), Annuities, etc.	
	\$
	\$
	\$

At what rate do you anticipate your estates and property will increase (or decrease) on an annual basis (i.e., do you typically see your cumulative estates grow 4% annually, etc)?

\$____

Do you own any property located outside of Texas?		If so, describe:	
	(Yes or No)		
			0
Have either Husband or Wife inherited property and/o	or received property	as a gift, or have any such expec	station?
If so, describe and give approximate values.			
Have you always lived in Texas? If not	, when did you mov	re to Texas? (Year)	
Please list locations (by year) of your out-of-state res			
Do you have a safety deposit box? If s	o, what bank?		
What is held in such safety deposit box?			
Have Husband or Wife ever filed gift tax returns?	lf so nlease	attach all such returns	
nate hassand of this even ned girt tax returns:	ii 50, pied3e		

Does Husband or Wife give property currently to charity, or have any desire to do so now or in the future

(including by Will)?	If yes, please	describe t	the nature	and extent	of current	gifts and/or th	е
anticipated future gifts.							

List below any charity, including a church, college or other institution that you wish to remember in your Will.

Amount or percentage gift

List below the name, age, relationship and address of the person (or the name and address of the Bank) that you wish to have serve in the capacities indicated:

Husband's Will
Executor
Alternate Executor(s)
Trustee
Alternate Trustee
Guardian for minor children
Alternate Guardian for minor children
Wife's Will
Executor
Alternate Executor(s)

Trustee	
-	
Alternate Tr	ustee
-	
Guardian fo	r minor children
-	
Alternate G	uardian for minor children
Alternate U	

List below the name, age, relationship and address of any person who has <u>not</u> been mentioned above in this Will Fact Sheet but is to receive property under Husband or Wife's Will, and indicate the property each person is to receive.

DISPOSITION OF PROPERTY

In your own words, describe the way you want your property to pass under your will: (Use back of sheet if necessary.)

HUSBAND

(a) If your spouse survives you (specify whether gifts are to be outright or in trust).

(b) If your spouse does not survive you (specify whether gifts are to be outright or in trust).

(c) Do you wish to use trusts to save estate taxes at your spouse's death (assuming you are the first to die)? At your children's deaths?

(d) Who should inherit your property if your spouse and all of your descendants are gone?

WIFE

(a) If your spouse survives you (specify whether gifts are to be outright or in trust).

(b) If your spouse does not survive you (specify whether gifts are to be outright or in trust).

(c) Do you wish to use trusts to save estate taxes at your spouse's death (assuming you are the first to die)? At your children's deaths?

(d) Who should inherit your property if your spouse and all of your descendants are gone?

Are all of the persons whose names appear on this form citizens of the U.S.? If not, indicate who the noncitizens are in the "Remarks" section. List below the name, address and telephone number of: (a) Your insurance agent: _____ (b) The accountant or other person who prepares your income tax return: (c) Your Bank or Trust Officer: (d) Your lawyer:

Remarks: (Use back of sheet if necessary.)

Special Issues:

Indicate whether you would like to execute the following documents:

Power of Attorney (for asset management).
Health Care Power of Attorney.
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Living Will.
•

4. Designation of Guardian In the Event of Later Incompetence.