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ESTATE PLANNING INFORMATION SHEET

1. **PERSONAL DATA**

Client #1 _____	Client #2 _____
Soc. Sec. No. _____	Soc. Sec. No. _____
U.S. Citizen? _____	U.S. Citizen? _____
Date of Birth _____	Date of Birth _____
Drivers License # _____	Drivers License # _____
Previous Marriage? _____	Previous Marriage? _____
Address _____ _____	
Home Phone _____	
Cell Phone _____	Cell Phone _____
Email _____	Email _____
Employer _____	Employer _____
Business Phone _____	Business Phone _____
Accountant _____	Business Phone _____
Company Name _____	Email _____
Life Insurance Agent _____	Business Phone _____
Company Name _____	Email _____
Financial Planner _____	Business Phone _____
Company Name _____	Email _____

- _____ Deeds To Real Estate (Legal Description).
- _____ Investment Statements (IRAs, Mutual Funds, Life Insurance, Retirement Accounts, etc.)
- _____ New Change of Beneficiary forms for employer life insurance and 401K
- _____ Second Appointment: Date: _____; Time: _____; Location: _____

The following are descriptions of the various roles in the various documents and each of their respective responsibilities in connection with a thorough estate plan. Please provide the full name (including middle initial), address, telephone number (home and cell), and email address of the individual(s) you would like to appoint for the corresponding responsibility. *If you are married, your spouse will be your first choice on all of the documents, unless you specify otherwise.*

1. Personal Representative. Your Last Will and Testament appoints a Personal Representative ("Executor") to manage any probate affairs, distribute personal effects and file a final estate tax return in connection with your estate:

_____ (first alternate);

_____ (second alternate);

2. Successor Trustee. The primary responsibility as Successor Trustee is to follow the general terms of the Trust, including hiring professionals, including attorneys, accountants and investment advisors to protect and manage trust assets on behalf of the Trust beneficiaries:

_____ (first alternate);

_____ (second alternate);

3. Durable Power of Attorney. The Durable Power of Attorney appoints an Agent to assist you with your personal, financial and legal affairs, if you are incapacitated. Your Agent has authority to act on your behalf to accomplish many things, including signing checks, filing tax returns, defending you in lawsuits, applying for governmental benefits and any other necessary matters that may be required:

_____ (first alternate);

_____ (second alternate);

4. Patient Advocate. Your Patient Advocate is authorized to make general medical decisions in the event that you are unable to participate in your own medical decisions. Your Patient Advocate is also responsible for following your wishes on life support:

_____ (first alternate);

_____ (second alternate);

5. Guardianship (if applicable). The responsibilities for guardian include making medical decisions, and, as conservator, include making financial decisions for minor children.

_____ (first alternate);

_____ (second alternate);

Please complete this form and provide it to our office at our next meeting. Please feel free to call with any questions you may have regarding this matter.