
Agnew Law Office, P.C.

An Estate Planning Law Firm

ESTATE PLANNING FINANCIAL INFORMATION

**CONFIDENTIAL
COVERED BY ATTORNEY-CLIENT PRIVILEGE**

*General Estimates of Values are Sufficient
Precise Values and Account Numbers are NOT Required*

	<u>VALUE</u>	<u>OWNED BY</u>	
Bank Accounts			
Checking	\$ _____	<input type="checkbox"/> Self	<input type="checkbox"/> Joint w/ Child
Savings	\$ _____	<input type="checkbox"/> Self	<input type="checkbox"/> Joint w/ Child
CDs	\$ _____	<input type="checkbox"/> Self	<input type="checkbox"/> Joint w/ Child
Money Market	\$ _____	<input type="checkbox"/> Self	<input type="checkbox"/> Joint w/ Child
Investment Assets [Non-IRA or 401(k) Accounts- see next page for those]			
Mutual Funds	\$ _____	<input type="checkbox"/> Self	<input type="checkbox"/> Joint w/ Child
Stocks	\$ _____	<input type="checkbox"/> Self	<input type="checkbox"/> Joint w/ Child
Bonds	\$ _____	<input type="checkbox"/> Self	<input type="checkbox"/> Joint w/ Child
_____	\$ _____	<input type="checkbox"/> Self	<input type="checkbox"/> Joint w/ Child
Real Estate			
Residence	\$ _____	<input type="checkbox"/> Self	<input type="checkbox"/> Joint w/ Child
Vacation	\$ _____	<input type="checkbox"/> Self	<input type="checkbox"/> Joint w/ Child
Commercial	\$ _____	<input type="checkbox"/> Self	<input type="checkbox"/> Joint w/ Child

Retirement Accounts

IRAs	\$ _____	<input type="checkbox"/> Self	<input type="checkbox"/> Joint w/ Child
IRAs	\$ _____	<input type="checkbox"/> Self	<input type="checkbox"/> Joint w/ Child
401(k)	\$ _____	<input type="checkbox"/> Self	<input type="checkbox"/> Joint w/ Child
401(k)	\$ _____	<input type="checkbox"/> Self	<input type="checkbox"/> Joint w/ Child
403(b)	\$ _____	<input type="checkbox"/> Self	<input type="checkbox"/> Joint w/ Child
Roth IRA	\$ _____	<input type="checkbox"/> Self	<input type="checkbox"/> Joint w/ Child
_____	\$ _____	<input type="checkbox"/> Self	<input type="checkbox"/> Joint w/ Child
_____	\$ _____	<input type="checkbox"/> Self	<input type="checkbox"/> Joint w/ Child

Life Insurance (Death Benefit)

Permanent	\$ _____	<input type="checkbox"/> Self	<input type="checkbox"/> Joint w/ Child
Permanent	\$ _____	<input type="checkbox"/> Self	<input type="checkbox"/> Joint w/ Child
Term	\$ _____	<input type="checkbox"/> Self	<input type="checkbox"/> Joint w/ Child
Term	\$ _____	<input type="checkbox"/> Self	<input type="checkbox"/> Joint w/ Child

Miscellaneous

Vehicle	\$ _____	<input type="checkbox"/> Self	<input type="checkbox"/> Joint w/ Child
Vehicle	\$ _____	<input type="checkbox"/> Self	<input type="checkbox"/> Joint w/ Child
Jewelry	\$ _____	<input type="checkbox"/> Self	<input type="checkbox"/> Joint w/ Child
Furniture	\$ _____	<input type="checkbox"/> Self	<input type="checkbox"/> Joint w/ Child
_____	\$ _____	<input type="checkbox"/> Self	<input type="checkbox"/> Joint w/ Child
_____	\$ _____	<input type="checkbox"/> Self	<input type="checkbox"/> Joint w/ Child

Stuff That Doesn't Fit Anywhere Else

_____	\$ _____	<input type="checkbox"/> Self	<input type="checkbox"/> Joint w/ Child
_____	\$ _____	<input type="checkbox"/> Self	<input type="checkbox"/> Joint w/ Child
_____	\$ _____	<input type="checkbox"/> Self	<input type="checkbox"/> Joint w/ Child
_____	\$ _____	<input type="checkbox"/> Self	<input type="checkbox"/> Joint w/ Child
_____	\$ _____	<input type="checkbox"/> Self	<input type="checkbox"/> Joint w/ Child