

CHERRY CREEK CORPORATE CENTER  
4500 CHERRY CREEK DRIVE SOUTH #600  
DENVER, CO 80246-1500  
303.322.8943  
[WWW.WADEASH.COM](http://WWW.WADEASH.COM)

**DISCLAIMER**

*Material presented on the Wade Ash Woods Hill & Farley, P.C., website is intended for informational purposes only. It is not intended as professional service advice and should not be construed as such.*

*The following memorandum is representative of the types of information we provide to clients when we prepare estate planning documents for them. However, this material may not be used by every attorney in the firm in every case. The attorneys at Wade Ash view each case as uniquely different and, therefore, the information we provide to our clients may be substantially different depending on the client's needs and the nature and extent of their assets.*

*Any unauthorized use of material contained herein is at the user's own risk. Transmission of the information and material herein is not intended to create, and receipt does not constitute, an agreement to create an attorney-client relationship with Wade Ash Woods Hill & Farley, P.C., or any member thereof.*

---

**FAMILY FINANCIAL QUESTIONNAIRE**

This Questionnaire should help your family with transferring assets and coping with financial matters after your death.

I. Estate Plan Information

A. Wills and Trusts

1. Location of Original Will (and Codicils), Personal Effects Memo, and Trust Agreements:

---

---

2. Fiduciaries named in Will or revocable trust:

- a. Personal Representative (name, address and phone):

WADE ASH WOODS HILL & FARLEY, P.C.

---

---

b. Guardian of children (name, address and phone):

---

---

c. Trustee (name, address and phone):

---

---

B. Financial Power of Attorney: Agent (name, address and phone):

---

Location of original: \_\_\_\_\_

C. Medical Power of Attorney: Agent (name, address and phone):

---

Location of original: \_\_\_\_\_

D. Living Will:

Location of original: \_\_\_\_\_

E. Organ Donor Card: \_\_\_\_\_

F. Wishes for burial: \_\_\_\_\_

---

G. Are you a Trustee of any trusts? Describe and give name and

WADE ASH WOODS HILL & FARLEY, P.C.

address of Successor Trustee: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

II. Personal Information

A. Family Members

<u>Name</u>	<u>Relationship</u>	<u>Address</u>	<u>Birth Date</u>	<u>SS#</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

<u>Name</u>	<u>Relationship</u>	<u>Address</u>	<u>Birth Date</u>	<u>SS#</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

B. Are you a veteran? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, list branch of service and date of discharge:  
\_\_\_\_\_  
\_\_\_\_\_

III. Advisors (name, address and phone)

A. Accountant: \_\_\_\_\_  
\_\_\_\_\_

B. Attorney: \_\_\_\_\_

WADE ASH WOODS HILL & FARLEY, P.C.

---

C. Insurance Agent: \_\_\_\_\_

---

D. Financial Planner: \_\_\_\_\_

---

E. Investment Advisor: \_\_\_\_\_

IV. Asset Information

A. Attach a list of assets and liabilities, or fill out the following schedules. Indicate where original policies and other information is kept.

B. Insurance/Annuities

1. Location of policies: \_\_\_\_\_

2. List of policies:

<u>Insured</u>	<u>Owner</u>	<u>Beneficiary</u>	<u>Company</u>	<u>Face Amount</u>
----------------	--------------	--------------------	----------------	--------------------

---

C. Real Property, Oil and Gas Interests

1. Location of Deeds, Leases, Division Orders: \_\_\_\_\_

WADE ASH WOODS HILL & FARLEY, P.C.

2. List of Properties:

Owner      Address of Property                      Mortgage Company

---

---

---

3. Tenants of the above properties:

Name              Address              Lease End              Rental

---

---

D. Partnership Interests/Limited Liability Companies

1. Location of Agreements: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. List of Interests:

Name of  
Partnership/Company              % Interest              Person to Contact at Your Death

---

---

---

---

---

---

---

WADE ASH WOODS HILL & FARLEY, P.C.

E. Securities

1. Investment accounts (company and account numbers):

---

---

---

2. Closely held companies:

<u>Name of Company</u>	<u>No. of Shares</u>	<u>Person to Contact at Your Death</u>
------------------------	----------------------	--

---

---

F. Bank Accounts

1. Location of bank books, original certificates of deposit:

---

---

---

2. List of Accounts:

<u>Bank</u>	<u>Owner</u>	<u>Number</u>	<u>Amount</u>
-------------	--------------	---------------	---------------

---

---

---

---

---

---

WADE ASH WOODS HILL & FARLEY, P.C.

G. Employee Benefits

1. Person to contact at place of employment: \_\_\_\_\_  
\_\_\_\_\_
2. Benefits at company:  
Life Insurance \_\_\_\_\_ Salary Benefit \_\_\_\_\_  
Pension \_\_\_\_\_ Profit Sharing \_\_\_\_\_  
Stock account \_\_\_\_\_

H. Individual Retirement Accounts

<u>Bank or Company</u>	<u>Beneficiary</u>	<u>Amount</u>
_____		
_____		
_____		
_____		
_____		

I. Miscellaneous

1. Collections: art, coin, etc. (Describe and list person to contact for valuation/sale): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
2. Vehicles: Location of titles: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
3. Jewelry, furs, silver: Location of appraisals, if any; person to contact for valuation: \_\_\_\_\_

WADE ASH WOODS HILL & FARLEY, P.C.

4. Are you a beneficiary of any trusts: (Describe and give name and address of Trustee): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. Safe Deposit Box (Name of Bank, box number, location of key): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. Persons with access to Safe Deposit Box: (Include name, address & phone number): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_