



ESTATE PLANNING WORKSHEET - INDIVIDUALS

DIRECTIONS FOR COMPLETION:

Thank you for entrusting your Estate Planning to our firm. We appreciate the opportunity to assist you and look forward to promptly completing your plan.

Please complete this worksheet and return to our office as soon as possible. For your convenience, we accept this worksheet from our clients by email or fax as well as U.S. Mail or courier. If you send to us by email or fax, please confirm our receipt of the document after you have sent it by calling our offices at 469-607-4500.

If you transmit this document by email, please send it to intake@parvinlaw.com.

If you send it by fax, please fax to (469) 697-4505.

We are here to help you at every step. Though this worksheet is designed to be a simple-to-answer document to help us draft your plan, if you find any of these questions too difficult to answer or if you are unsure how to respond, please feel free to leave the answer blank and note your question. Mr. Parvin, or an attorney at our firm, will contact you to discuss any questions you may have.

Upon our receipt of this completed worksheet, we will review the document and begin drafting your plan. Our office will be in contact with you to schedule an appointment for Mr. Parvin, or an attorney at our firm, to review the plan with you and execute all documents. Again, if you have any questions or concerns, please do not hesitate to contact us.

Thank you,

PARVIN LAW GROUP, P.C.

Chris Parvin, J.D., LL.M.
Board Certified, *Estate Planning &
Probate Law* Texas Board of Legal
Specialization

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INDIVIDUAL FACT FINDER

Name:		DOB:	SSN:
AKA, if any:			
Address:			
City:	State:	Zip:	
County:	Home Phone:	Mobile:	
Fee Charged:	Referral Source:	Date File Opened:	
Where to send mail? <input type="checkbox"/> Home <input type="checkbox"/> Office <input type="checkbox"/> Other: _____ _____	How to address mail? <input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/> Dr. <input type="checkbox"/> Other: _____	Send email? <input type="checkbox"/> No, just mail <input type="checkbox"/> Yes, email everything <input type="checkbox"/> Send both mail and email	Send Copies? <input type="checkbox"/> No <input type="checkbox"/> CPA <input type="checkbox"/> Financial Planner <input type="checkbox"/> Insurance Agent <input type="checkbox"/> Broker <input type="checkbox"/> Other: _____

Employer:	Occupation:
Work Address:	Work Phone:
Email:	Work fax:

Any deceased children? ☐ Yes ☐ No If yes, specify below and include living descendants of the deceased child(ren)
 Include future children? ☐ Yes ☐ No

Full Name of Child:	Age of Child	Gender	Any grandchildren?
1			
2			
3			
4			
5			
6			
7			
8			

Notes:

Assets	Full Value	[Less Debts]	Net Value	Comments
Life insurance				
Retirement plans				
Residence				
Other real estate: Property #1				
Property #2				
Property #3				
Checking				
Savings				
CDs				
Brokerage: Account #1				
Account #2				
Account #3				
Notes (loans to others)				
Businesses: Business #1				
Business #2				
Business #3				
Vehicles				
Personal effects				
Potential inheritance				
Other assets				
Total				

Add provision stating a person shall be treated as having failed to serve if he/she refuses to submit to a mental status exam? ☐ No ☐ Yes, any interested party can request mental exam ☐ Yes, any named successor can request mental exam

Term used to describe creator of trust? ☐ Grantor ☐ Settlor ☐ Trustor

Medical Power of Attorney

Prepare Medical Power of Attorney?

___ Yes

___ No

1st [agent / attorney in
fact]'s Name

Street Address

City, State, Zip

Phone

2nd [agent / attorney in
fact]'s Name

Street Address

City, State, Zip

Phone

3rd [agent / attorney in
fact]'s Name

Street Address

City, State, Zip

Phone

4th [agent / attorney in
fact]'s Name

Street Address

City, State, Zip

Phone

Restrict decision-making authority
of the [agents / attorneys in fact]?

___ Yes

___ No

Duration of the [Medical Power of
Attorney]?

___ Indefinite

___ Only until

Where will the original be kept?

HIPAA Release

___ Prepare form

___ Client already has one

___ Client doesn't want one

1st [agent / attorney in
fact]'s Name

Street Address

City, State, Zip

Phone

2nd [agent / attorney in
fact]'s Name

Street Address

City, State, Zip

Phone

3rd [agent / attorney in
fact]'s Name

Street Address

City, State, Zip

Phone

4th [agent / attorney in
fact]'s Name

Street Address

City, State, Zip

Phone

Should [agents / attorneys in fact] serve in succession or as a group?

___ In succession

___ As a group

Durable Power of Attorney

___ Prepare form

___ Client already has one

___ Client doesn't want one

1st [agent / attorney in
fact]'s Name

Street Address

City, State, Zip

Phone

Relationship

2nd [agent / attorney in
fact]'s Name

Street Address

City, State, Zip

Phone

Relationship

3rd [agent / attorney in
fact]'s Name

Street Address

City, State, Zip

Phone

Relationship

4th [agent / attorney in
fact]'s Name

Street Address

City, State, Zip

Phone

Relationship

Durable Power of Attorney (continued)

When effective?	<input type="checkbox"/> Immediately	<input type="checkbox"/> Upon incapacity or disability	<input type="checkbox"/> Let client decide
Record the POA?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Add any "Hot Powers" that must be initialed?	<input type="checkbox"/> Create, amend, revoke an inter vivos trust <input type="checkbox"/> Create or change rights of survivorship	<input type="checkbox"/> Create or change a beneficiary designation <input type="checkbox"/> Authorize another person to act under the POA	
Multiple agents act:	<input type="checkbox"/> Jointly	<input type="checkbox"/> May act separately	
Additional powers?	<input type="checkbox"/> Take legal action to enforce <input type="checkbox"/> Natural Resources <input type="checkbox"/> Deal with IRS <input type="checkbox"/> Create or change survivorship interest <input type="checkbox"/> Digital assets	<input type="checkbox"/> Create, modify or revoke a Rev Trust <input type="checkbox"/> Appoint new agent <input type="checkbox"/> Fund a trust not created by client <input type="checkbox"/> Change beneficiary designations <input type="checkbox"/> All other powers	<input type="checkbox"/> Deal with community property <input type="checkbox"/> Pay agent a fee <input type="checkbox"/> Reject or disclaim property <input type="checkbox"/> Make loans to agent
Revoke existing POA?	<input type="checkbox"/> No	<input type="checkbox"/> Yes, specify which one Type: _____	<input type="checkbox"/> Yes, revoke all prior
		Add recording info? _____	
		Did witnesses sign? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Include power to make gifts?	<input type="checkbox"/> Yes, only annual exclusion gifts	<input type="checkbox"/> Yes, annual exclusion gifts, plus larger gifts	<input type="checkbox"/> No gifts
If yes to Annual Exclusion Gifts, to whom may annual exclusion gifts be made?	<input type="checkbox"/> Anyone	<input type="checkbox"/> Only specified persons: <ul style="list-style-type: none"> <input type="checkbox"/> Descendants <input type="checkbox"/> Spouse <input type="checkbox"/> Descendants' spouses <input type="checkbox"/> Parents <input type="checkbox"/> Others: _____ 	
If yes to Larger Gifts, to whom may larger gifts be made?	<input type="checkbox"/> Only to descendants	<input type="checkbox"/> To descendants and charities	
How extensive to you want to draft the power to make gifts?	<input type="checkbox"/> Limit to when needed to save taxes	<input type="checkbox"/> No limit	
Give agent power to make transfers and gifts to qualify for SSI and Medicaid?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Limit gifts by agent to himself or herself to greater of \$5,000 or 5% of the estate's value (to prevent agent from having general power over the estate)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Give agent power to change beneficiaries on life insurance and retirement accounts?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Do you want to specifically identify one or more pieces of real estate?	<input type="checkbox"/> Yes – How many? _____	<input type="checkbox"/> No	
Also draft:	<input type="checkbox"/> Notice to person executing the power of attorney	<input type="checkbox"/> Notice to person accepting appointment as agent	<input type="checkbox"/> Certification of Agent <input type="checkbox"/> Affidavit of Physician <input type="checkbox"/> [State] Estates Code Provisions

Notes:

Revocation of Power of Attorney

☐ Prepare form

☐ Client doesn't need one

☐ Client doesn't want one

Which type of POA is being revoked?

☐ Durable POA

☐ General POA

☐ Limited POA

☐ Statutory Durable POA

☐ Uniform Statutory Form POA

☐ Other: _____

Did witnesses sign the POA being revoked?

☐ Yes – Who were they? _____

☐ No

Do you want the Revocation to be witnessed?

☐ Yes

☐ No

Codicil

___ Prepare form

___ Client doesn't need one

___ Client doesn't want one

Which Codicil is this?

___ First

___ Second

___ Third

___ Fourth

___ Rewrite old provision

___ Insert new provision

___ Delete existing provision

Information Regarding First Change:

Information Regarding Second Change:

___ Rewrite old provision

___ Insert new provision

___ Delete existing provision

Information Regarding Third Change:

___ Rewrite old provision

___ Insert new provision

___ Delete existing provision

Information Regarding Fourth Change:

___ Rewrite old provision

___ Insert new provision

___ Delete existing provision

Information Regarding Fifth Change:

___ Rewrite old provision

___ Insert new provision

___ Delete existing provision

Appointment of Guardian - Adult

☐ Prepare form

☐ Client already has one

☐ Client doesn't want one

	Guardian of Person	
	Name	Relation
1 st Guardian of Person		
2 nd Guardian of Person		
3 rd Guardian of Person		
4 th Guardian of Person		

	Guardian of Estate	
	Name	Relation
1 st Guardian of Estate		
2 nd Guardian of Estate		
3 rd Guardian of Estate		
4 th Guardian of Estate		

	Disqualified Guardian	
	Name	Relation
1 st Disqualified Guardian		
2 nd Disqualified Guardian		
3 rd Disqualified Guardian		
4 th Disqualified Guardian		

Guardian to serve without bond?	<input type="checkbox"/> Yes, add statement waiving bond	<input type="checkbox"/> No, do not waive requirement of bond

HealthCare Agent for Children

☐ Prepare form

☐ Client already has one

☐ Client doesn't want one

Name(s) of Agent(s)

(Co-agents may be named if they are married)

Relation

1st Agent(s)

a.

b.

2nd Agent(s)

a.

b.

3rd Agent(s)

a.

b.

4th Agent(s)

a.

b.

Which children will be included?

Include afterborn?

☐ Yes

☐ No

Nomination of Guardian for Children

☐ Prepare form

☐ Client already has one

☐ Client doesn't want one

Name of Guardian

(Co-guardians may be named if they are married)

Relation

1st Guardian(s)

a.

b.

2nd Guardian(s)

a.

b.

3rd Guardian(s)

a.

b.

4th Guardian(s)

a.

b.

Which children will be included?

Include afterborn?

☐ Yes

☐ No

Will (Simple)

Executors

Name

Relation

1st Set

a.	
b.	
c.	

2nd Set

a.	
b.	
c.	

3rd Set

a.	
b.	
c.	

4th Set

a.	
b.	
c.	

Trustees

Name

Relation

1st Set

a.	
b.	
c.	

2nd Set

a.	
b.	
c.	

3rd Set

a.	
b.	
c.	

4th Set

a.	
b.	
c.	

Specific Bequests

FIRST BEQUEST	<p>Recipient: _____</p> <p>Relation: _____</p> <p>If recipient not alive, what happens to gift?</p> <p> <input type="checkbox"/> Gift lapses <input type="checkbox"/> Gift passes to recipient's descendants <input type="checkbox"/> Gift passes to recipient's spouse <input type="checkbox"/> Gift passes to someone else: _____ </p>	<p>Indicate type of gift:</p> <p> <input type="checkbox"/> Animal <input type="checkbox"/> Animal with \$ _____ Hold money in trust? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Cash of \$ _____ <input type="checkbox"/> Life estate in homestead <input type="checkbox"/> Homestead outright <input type="checkbox"/> Real estate outright <input type="checkbox"/> Stock: _____ shares of _____ <input type="checkbox"/> Other: _____ </p> <p>Further describe gift:</p> <p>_____</p> <p>_____</p>
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SECOND BEQUEST	<p>Recipient: _____</p> <p>Relation: _____</p> <p>If recipient not alive, what happens to gift?</p> <p> <input type="checkbox"/> Gift lapses <input type="checkbox"/> Gift passes to recipient's descendants <input type="checkbox"/> Gift passes to recipient's spouse <input type="checkbox"/> Gift passes to someone else: _____ </p>	<p>Indicate type of gift:</p> <p> <input type="checkbox"/> Animal <input type="checkbox"/> Animal with \$ _____ Hold money in trust? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Cash of \$ _____ <input type="checkbox"/> Life estate in homestead <input type="checkbox"/> Homestead outright <input type="checkbox"/> Real estate outright <input type="checkbox"/> Stock: _____ shares of _____ <input type="checkbox"/> Other: _____ </p> <p>Further describe gift:</p> <p>_____</p> <p>_____</p>
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THIRD BEQUEST	<p>Recipient: _____</p> <p>Relation: _____</p> <p>If recipient not alive, what happens to gift?</p> <p> <input type="checkbox"/> Gift lapses <input type="checkbox"/> Gift passes to recipient's descendants <input type="checkbox"/> Gift passes to recipient's spouse <input type="checkbox"/> Gift passes to someone else: _____ </p>	<p>Indicate type of gift:</p> <p> <input type="checkbox"/> Animal <input type="checkbox"/> Animal with \$ _____ Hold money in trust? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Cash of \$ _____ <input type="checkbox"/> Life estate in homestead <input type="checkbox"/> Homestead outright <input type="checkbox"/> Real estate outright <input type="checkbox"/> Stock: _____ shares of _____ <input type="checkbox"/> Other: _____ </p> <p>Further describe gift:</p> <p>_____</p> <p>_____</p>
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FOURTH BEQUEST	<p>Recipient: _____</p> <p>Relation: _____</p> <p>If recipient not alive, what happens to gift?</p> <p> <input type="checkbox"/> Gift lapses <input type="checkbox"/> Gift passes to recipient's descendants <input type="checkbox"/> Gift passes to recipient's spouse <input type="checkbox"/> Gift passes to someone else: _____ </p>	<p>Indicate type of gift:</p> <p> <input type="checkbox"/> Animal <input type="checkbox"/> Animal with \$ _____ Hold money in trust? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Cash of \$ _____ <input type="checkbox"/> Life estate in homestead <input type="checkbox"/> Homestead outright <input type="checkbox"/> Real estate outright <input type="checkbox"/> Stock: _____ shares of _____ <input type="checkbox"/> Other: _____ </p> <p>Further describe gift:</p> <p>_____</p> <p>_____</p>
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Specific Bequests

FIFTH BEQUEST	<p>Recipient: _____</p> <p>Relation: _____</p> <p>If recipient not alive, what happens to gift?</p> <p> <input type="checkbox"/> Gift lapses <input type="checkbox"/> Gift passes to recipient's descendants <input type="checkbox"/> Gift passes to recipient's spouse <input type="checkbox"/> Gift passes to someone else: _____ </p>	<p>Indicate type of gift:</p> <p> <input type="checkbox"/> Animal <input type="checkbox"/> Animal with \$ _____ Hold money in trust? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Cash of \$ _____ <input type="checkbox"/> Life estate in homestead <input type="checkbox"/> Homestead outright <input type="checkbox"/> Real estate outright <input type="checkbox"/> Stock: _____ shares of _____ <input type="checkbox"/> Other: _____ </p> <p>Further describe gift:</p> <p>_____</p> <p>_____</p>
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SIXTH BEQUEST	<p>Recipient: _____</p> <p>Relation: _____</p> <p>If recipient not alive, what happens to gift?</p> <p> <input type="checkbox"/> Gift lapses <input type="checkbox"/> Gift passes to recipient's descendants <input type="checkbox"/> Gift passes to recipient's spouse <input type="checkbox"/> Gift passes to someone else: _____ </p>	<p>Indicate type of gift:</p> <p> <input type="checkbox"/> Animal <input type="checkbox"/> Animal with \$ _____ Hold money in trust? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Cash of \$ _____ <input type="checkbox"/> Life estate in homestead <input type="checkbox"/> Homestead outright <input type="checkbox"/> Real estate outright <input type="checkbox"/> Stock: _____ shares of _____ <input type="checkbox"/> Other: _____ </p> <p>Further describe gift:</p> <p>_____</p> <p>_____</p>
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SEVENTH BEQUEST	<p>Recipient: _____</p> <p>Relation: _____</p> <p>If recipient not alive, what happens to gift?</p> <p> <input type="checkbox"/> Gift lapses <input type="checkbox"/> Gift passes to recipient's descendants <input type="checkbox"/> Gift passes to recipient's spouse <input type="checkbox"/> Gift passes to someone else: _____ </p>	<p>Indicate type of gift:</p> <p> <input type="checkbox"/> Animal <input type="checkbox"/> Animal with \$ _____ Hold money in trust? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Cash of \$ _____ <input type="checkbox"/> Life estate in homestead <input type="checkbox"/> Homestead outright <input type="checkbox"/> Real estate outright <input type="checkbox"/> Stock: _____ shares of _____ <input type="checkbox"/> Other: _____ </p> <p>Further describe gift:</p> <p>_____</p> <p>_____</p>
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EIGHTH BEQUEST	<p>Recipient: _____</p> <p>Relation: _____</p> <p>If recipient not alive, what happens to gift?</p> <p> <input type="checkbox"/> Gift lapses <input type="checkbox"/> Gift passes to recipient's descendants <input type="checkbox"/> Gift passes to recipient's spouse <input type="checkbox"/> Gift passes to someone else: _____ </p>	<p>Indicate type of gift:</p> <p> <input type="checkbox"/> Animal <input type="checkbox"/> Animal with \$ _____ Hold money in trust? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Cash of \$ _____ <input type="checkbox"/> Life estate in homestead <input type="checkbox"/> Homestead outright <input type="checkbox"/> Real estate outright <input type="checkbox"/> Stock: _____ shares of _____ <input type="checkbox"/> Other: _____ </p> <p>Further describe gift:</p> <p>_____</p> <p>_____</p>
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DISTRIBUTION OF PROPERTY

PRIMARY BENEFICIARIES:

____ Descendants

___ Equal shares to several beneficiaries (go to next page)

___ Various percentages to several beneficiaries (go to next page)

____ One or more beneficiaries in succession (go to next page)

CONTINGENT BENEFICIARIES:

If no descendants
alive to:

____ To heirs

____ Equal shares to several beneficiaries (go to next page)

____ Various percentages to several beneficiaries (go to next page)

____ One or more beneficiaries in succession (go to next page)

Notes:

[illegible]

Equal Shares

Benef 1: _____

____ Person, or if not alive to:

____ Descendants, then to other benefs pro rata

____ Other beneficiaries pro rata

____ Spouse, then desc, then other benefs pro rata

____ Spouse, then other benefs pro rata

____ Charity, or if not in existence to:

____ Other benefs pro rata

____ Executor chooses a similar charity

____ Gift lapses

Benef 2: _____

____ Person, or if not alive to:

____ Descendants, then to other benefs pro rata

____ Other beneficiaries pro rata

____ Spouse, then desc, then other benefs pro rata

____ Spouse, then other benefs pro rata

____ Charity, or if not in existence to:

____ Other benefs pro rata

____ Executor chooses a similar charity

____ Gift lapses

Benef 3: _____

____ Person, or if not alive to:

____ Descendants, then to other benefs pro rata

____ Other beneficiaries pro rata

____ Spouse, then desc, then other benefs pro rata

____ Spouse, then other benefs pro rata

____ Charity, or if not in existence to:

____ Other benefs pro rata

____ Executor chooses a similar charity

____ Gift lapses

Benef 4: _____

____ Person, or if not alive to:

____ Descendants, then to other benefs pro rata

____ Other beneficiaries pro rata

____ Spouse, then desc, then other benefs pro rata

____ Spouse, then other benefs pro rata

____ Charity, or if not in existence to:

____ Other benefs pro rata

____ Executor chooses a similar charity

____ Gift lapses

Percentages

Benef 1: _____

Relation: _____ Share: _____

____ Person, or if not alive to:

____ Descendants, then to other benefs pro rata

____ Other beneficiaries pro rata

____ Spouse, then desc, then other benefs pro rata

____ Spouse, then other benefs pro rata

____ Charity, or if not in existence to:

____ Other benefs pro rata

____ Executor chooses a similar charity

____ Gift lapses

____ Married Couple, or if both not alive to:

____ Descendants, then to other benefs pro rata

____ Other benefs pro rata

Benef 2: _____

Relation: _____ Shares: _____

____ Person, or if not alive to:

____ Descendants, then to other benefs pro rata

____ Other beneficiaries pro rata

____ Spouse, then desc, then other benefs pro rata

____ Spouse, then other benefs pro rata

____ Charity, or if not in existence to:

____ Other benefs pro rata

____ Executor chooses a similar charity

____ Gift lapses

____ Married Couple, or if both not alive to:

____ Descendants, then to other benefs pro rata

____ Other benefs pro rata

Benef 3: _____

Relation: _____ Shares: _____

____ Person, or if not alive to:

____ Descendants, then to other benefs pro rata

____ Other beneficiaries pro rata

____ Spouse, then desc, then other benefs pro rata

____ Spouse, then other benefs pro rata

____ Charity, or if not in existence to:

____ Other benefs pro rata

____ Executor chooses a similar charity

____ Gift lapses

____ Married Couple, or if both not alive to:

____ Descendants, then to other benefs pro rata

____ Other benefs pro rata

In Succession

Benef 1: _____

____ Person, or if not alive to:

____ Descendants, then to next benef

____ Next beneficiary

____ Charity

Benef 2: _____

____ Person, or if not alive to:

____ Descendants, then to next benef

____ Next beneficiary

____ Charity

Benef 3: _____

____ Person, or if not alive to:

____ Descendants, then to next benef

____ Next beneficiary

____ Charity

Benef 4: _____

____ Person, or if not alive to:

____ Descendants, then to next benef

____ Next beneficiary

____ Charity

Benef 5: _____

____ Person, or if not alive to:

____ Descendants, then to next benef

____ Next beneficiary

____ Charity

Benef 6: _____

____ Person, or if not alive to:

____ Descendants, then to next benef

____ Next beneficiary

____ Charity

Benef 7: _____

____ Person, or if not alive to:

____ Descendants, then to next benef

____ Next beneficiary

____ Charity

How to distribute property if all beneficiaries named above are dead or not in existence (for a charity)?

____ To heirs ____ To one charity

____ Do not address this issue ____ To several charities in equal shares

Details : _____

Form: Should property distributed to the Contingent Beneficiaries be held in individual trusts for their benefit? ____ Yes, but only for client's descendants ____ Yes, for all contingent beneficiaries ____ No