

Family Wealth Needs Evaluation Sheet

Contact Information: (All information is strictly confidential by attorney client privileges)

Your Name _____	Birth Date _____
Spouse/Partner Name _____	Birth Date _____
Address _____	
City _____	State _____ Zip _____
Home Phone _____	Work Phone _____
E-mail Address _____	
What is the best way to reach you? _____	

Your next step:

- Yes! Please call me to schedule a consultation to proceed with my own estate planning.
- Please have an attorney contact me for a follow-up appointment and/or another matter.
- Please send me your informative, fun and free monthly newsletter.
- Please send me your weekly Family Wealth Secrets e-newsletter.

PLEASE TELL US ABOUT YOUR NEEDS:

- I Need A Kids Protection Plan
- I Need To Avoid Probate
- I Need To Guarantee That My Spouse Would Know What To Do If Something Happened To Me
- I Need To Have My Estate Plan Reviewed
- I Need To Consider Advanced Estate Tax Protection Strategies
- I Need To Ensure That Half My Assets Over \$2 Million Do Not Go To The Government
- I Need A Business Succession Plan For My Business
- I Need Non-Biased Counsel Regarding My Personal Family Business
- I Need To Confirm That I Will Receive My Inheritance Protected From Creditors

How Else May We Serve You?

Please share your comments about this workshop:

- Check here if you do **NOT** want us to use your name