

Schmanke Law Office Use Only

Advanced Fee Quoted: _____ Fate Rate Quoted: _____

Case Number: _____ Clio Matter Number: _____

Payment Status/Agreement: _____

Preferred Method of Communication: E-mail Phone Text U.S. Mail

SCHMANKE LAW ESTATE PLANNING INTAKE Date: _____ County: _____

Testator: _____ DOB & SSN: _____

Address: _____

Email: _____

Phone #(s): _____

Personal Representative(s): _____

Heir #1: _____ Relation to Testator: _____ Percent: _____

Heir #2: _____ Relation to Testator: _____ Percent: _____

Heir #3: _____ Relation to Testator: _____ Percent: _____

Heir #4: _____ Relation to Testator: _____ Percent: _____

Heir #5: _____ Relation to Testator: _____ Percent: _____

Guardian(s): _____

Notes: _____

Real Property #1: _____ Beneficiary Deed

Holder of Deed: _____

_____ Legal Description

Desired Grantee: _____

Real Property #2: _____ Beneficiary Deed

Holder of Deed: _____

_____ Legal Description

Desired Grantee: _____

Real Property #3: _____ Beneficiary Deed

Holder of Deed: _____

_____ Legal Description

Desired Grantee: _____

Discuss:

Notes:

Beneficiary Deeds on Real Property

POD on All Bank Accounts

TOD on all Investment Instruments

TOD on all Titled Vehicles

Tangible Personal Property

HDPA: _____

HDPA Address: _____

HDPA Phone(s): _____

Alternate HDPA: _____

Alternate HDPA Address: _____

Alternate HDPA Phone(s): _____

Alternate HDPA #2: _____

Alternate HDPA #2 Address: _____

Alternate HDPA #2 Phone(s): _____

FDPA: _____ County: _____

Alternate FDPA: _____ County: _____

Alternate FDPA #2: _____ County: _____

Notes: _____
