

































































# ANTICIPATED INHERITANCE, GIFT, OR LAWSUIT JUDGMENT

Windfalls expected in the future; or monies anticipated through a lawsuit judgment.

Description	Value
_____	_____
_____	_____
_____	_____

TOTAL \$ \_\_\_\_\_

## OIL, GAS AND MINERAL INTERESTS

TYPE: Lease (L) ♦ Overriding royalty (O) ♦ Fee mineral estate (F) ♦ Working interest (W) ♦ Pooling agreement (P). *Please provide copies of Agreements, Certificates, and Deeds.*

Type _____	Company _____	Phone # _____
Address _____	City _____	State _____ Zip _____
Owner _____	Value _____	

Type _____	Company _____	Phone # _____
Address _____	City _____	State _____ Zip _____
Owner _____	Value _____	

TOTAL \$ \_\_\_\_\_

## SAFE DEPOSIT BOX

Name(s) in which box is held \_\_\_\_\_

Bank/Company \_\_\_\_\_ Box # \_\_\_\_\_

Address \_\_\_\_\_

Phone # \_\_\_\_\_ Email \_\_\_\_\_

Other people granted access \_\_\_\_\_

## OTHER ASSETS

Assets that do not fit into any previously listed category. List copyrights, trademarks, antiques, jewelry and artwork not previously listed.

Description	Owner	Value
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**TOTAL \$** \_\_\_\_\_

## FUNERAL /CREMATORY ARRANGEMENTS

I made pre-need arrangements with a funeral home/crematory.

Client #1 <input type="checkbox"/> Yes <input type="checkbox"/> No	Client #2 <input type="checkbox"/> Yes <input type="checkbox"/> No
Name: _____	Name: _____
Address: _____	Address: _____
Phone Number: _____	Phone Number: _____
Email: _____	Email: _____
The documents regarding my pre-need arrangements are located: _____ _____	The documents regarding my pre-need arrangements are located: : _____ _____
___ I have not made pre-need arrangements, but prefer that the following funeral home funeral home / crematory be used:	___ I have not made pre-need arrangements, but prefer that the following funeral home funeral home / crematory be used:
Name: _____	Name: _____
Address: _____	Address: _____
Phone Number: _____	Phone Number: _____

**ASSETS\***

	Client #1	Client #2	Joint
Real Property			
Cash Accounts			
Investment Accounts			
Stocks			
Personal Effects			
Retirements Plans			
Pension Plans			
Life Insurance Policies			
Annuities			
Bonds			
Monies Owed to You			
Partnership & LLC's Interests			
Corporate Business Interests			
Sole Proprietorship Interests			
Anticipated Inheritance, Gift, or Judgment			
Oil, Gas, and Mineral Interests			
Other Assets			
<b>TOTAL ASSETS</b>			

**LIABILITIES**

Loans payable			
Accounts payable			
Real estate mortgages payable			
Loans against life insurance			
Unpaid taxes			
Other obligations			
<b>TOTAL LIABILITIES</b>			
<b>NET ESTATE</b>			
<b>ANNUAL INCOME</b>			

\* Please use the totals from the previous pages to fill in these blanks.



