

ASSET PROTECTION QUESTIONNAIRE

AMIN LAW OFFICES, LTD.

*“A blueprint for realizing your personal,
family and business planning goals...”*

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FINANCIAL INFORMATION FACT-FINDER

IF YOU HAVE A DETAILED PERSONAL FINANCIAL STATEMENT OR COMPUTER SPREADSHEET LISTING ALL ASSETS, REAL ESTATE, IRAS, RETIREMENT PLANS, AND INSURANCE, THAT WILL SUFFICE FOR THE INITIAL MEETING, AS WILL A PLAN SUMMARY PREPARED BY A FINANCIAL PLANNER.

Attached is an asset protection planning “fact-finder” that is intended to provide us with a summary of your current assets, anticipated assets, current liabilities, and reasonably foreseeable potential liabilities, their approximate values, and how they are currently titled or to whom the liabilities are or will be owed.

The primary purpose of this fact-finder is to give us information concerning your solvency. This is an important step for you (and us as your advisors) in determining a strategy for an asset protection plan. The information requested under the form, in order of importance and usefulness to us, is as follows:

1. LISTING OF ALL YOUR ASSETS: Once we have a listing of all your assets, we can work from that list to obtain any additional information that is needed.
2. OWNERSHIP OF ASSETS: It is often necessary to determine how assets are currently owned (i.e., by one spouse or the other, or in joint tenancy) so that recommendations and suggestions can be made with respect to changes in ownership necessary to assist in the reduction of estate tax liability.
3. APPROXIMATE VALUE OF ASSETS: It is not necessary that you determine the exact balance or value of each of your assets. A reasonable approximation or average balance of an asset will be sufficient.
4. LISTING OF ALL YOUR PRESENT CREDITORS. Those holding actual matured debt, such as a mortgagee, credit card company, etc., and those with actual unmatured debt, e.g., a personal guaranty or demand promissory note, are present creditors. A transaction will be deemed fraudulent regardless of intent if it renders the transferor insolvent (unable to pay all existing liabilities).
5. LISTING OF ALL POTENTIAL SUBSEQUENT CREDITORS. A creditor a person could reasonably expect to have in the future is a “potential subsequent creditor.” This is a creditor that may be reasonably foreseen.

With the foregoing in mind, we request that you fill out the attached fact-finder in whatever detail you find comfortable. Whatever information you are unable to provide we should be able to secure from your financial professionals or other sources Obviously, the more information you are able to obtain, the less we will have to secure and the less time for which we will have to bill you.

The information that you do provide should be listed on separate lines, with each item being described by institution, number, and/or another identifying factor. Do not worry about getting each item under the “proper” heading. All of the assets and liabilities are totaled at the end of the form — regardless of the heading they are under — so if an asset or liability would seem to fit under more than one heading, just put it under one of the headings.

We will not be making an independent verification of the information you provide to us, but it is essential that we have complete and accurate information. Our planning recommendations to you may not be appropriate if they are based on inadequate information.

As always, please do not hesitate to call if you have any questions. Thank you.

JAYAL AMIN, ESQ.

General Information

HUSBAND

WIFE

Full Legal Name:

Full Legal Name:

Social Security Number:

Social Security Number:

Birth-date:

Birth-date:

Home Address:

Street

City, State, Zip and County

Home Address:

Street

City, State, Zip and County

Telephone and Fax Numbers:

Home

Work

Cell

Fax

Telephone and Fax Numbers:

Home

Work

Cell

Fax

E-mail Addresses:

Home

Work

E-mail Addresses:

Home

Work

Occupation:

Occupation:

Advisors

HUSBAND

WIFE

Accountant:

Accountant:

Name

Name

Phone

Phone

Broker / Financial Advisor:

Broker / Financial Advisor:

Name

Name

Phone

Phone

Insurance Agent (Life/Long-term Care):

Insurance Agent (Life/Long-term Care):

Name

Name

Phone

Phone

Trust Officer / Private Banker:

Trust Officer / Private Banker:

Name

Name

Phone

Phone

Other Advisor:

Other Advisor:

Name

Name

Type

Type

Phone

Phone

Summary of Assets

OWNERSHIP AND VALUE

<u>Asset</u>	<u>Husband</u>	<u>Wife</u>	<u>Joint</u>
CASH			
_____	\$ _____	\$ _____	\$ _____
BANK ACCOUNTS			
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
CERTIFICATES OF DEPOSIT			
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
MONEY MARKET FUNDS			
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
BROKERAGE HOUSE ACCOUNTS			
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
CERTIFICATES OF DEPOSIT			
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____

Asset

Husband

Wife

Joint

**GOVERNMENT SAVINGS BONDS
(Series E,H, EE, HH)**

_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____

TAX FREE BONDS

_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____

OTHER BONDS

_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____

MUTUAL FUNDS

_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____

**INDIVIDUAL RETIREMENT
ACCOUNTS (IRA's)**

_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____

KEOGH PLANS*

_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____

Asset

Husband

Wife

Joint

**QUALIFIED OR NONQUALIFIED
EMPLOYER PLAN***

_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____

*Are you currently receiving distributions from any of these retirement plans or the plan of another naming you as beneficiary? _____ yes _____ no

Please list the beneficiary or beneficiaries currently named for any of these retirement plans:

Plan	Beneficiary
_____	_____
_____	_____
_____	_____

ANNUITIES

_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____

**LIFE INSURANCE PAYABLE TO
SPOUSE OR DEPENDANT
(Face Value/Death Benefit)**

_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____

**LIFE INSURANCE PAYABLE TO
OTHERS
(Face Value/Death Benefit)**

_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____

Asset

Husband

Wife

Joint

REAL ESTATE* (Include residence, vacation homes, rental property, vacant land)

_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____

*Indicate if owned as tenants by the entirety

PASSIVE REAL ESTATE INVESTMENTS (i.e. limited partnerships, etc.)

_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____

AUTOMOBILES

_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____

INTERESTS IN CLOSELY HELD BUSINESSES

_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____

Is the business incorporated? _____ yes _____ no

If so, has it elected Subchapter "S" status? _____ yes _____ no

INTERESTS IN PARTNERSHIPS

_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____

<u>Asset</u>	<u>Husband</u>	<u>Wife</u>	<u>Joint</u>
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SOLE PROPRIETORSHIPS

	\$ _____	\$ _____	\$ _____
	\$ _____	\$ _____	\$ _____
	\$ _____	\$ _____	\$ _____

PERSONAL/MISCELLANEOUS ASSETS

	\$ _____	\$ _____	\$ _____
	\$ _____	\$ _____	\$ _____
	\$ _____	\$ _____	\$ _____

TOTAL ASSETS	\$ _____	\$ _____	\$ _____
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GRANT TOTAL	\$ _____		
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Summary of Liabilities

	LIABILITY AND VALUE		
<u>Liability</u>	<u>Husband</u>	<u>Wife</u>	<u>Joint</u>

SHORT-TERM (to be repaid within one year, e.g., credit cards, payable-on-demand promissory notes, etc.)

	\$ _____	\$ _____	\$ _____
	\$ _____	\$ _____	\$ _____
	\$ _____	\$ _____	\$ _____

TOTAL SHORT-TERM LIABILITIES	\$ _____	\$ _____	\$ _____
-------------------------------------	-----------------	-----------------	-----------------

Liability

Husband

Wife

Joint

PERSONAL GUARANTEES

_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
TOTAL PERSONAL GUARANTEES	\$ _____	\$ _____	\$ _____

**LONG-TERM LIABILITIES
(mortgages or notes not to be repaid within one year)**

_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
TOTAL LONG-TERM LIABILITIES	\$ _____	\$ _____	\$ _____

Net Worth

ASSETS LESS LIABILITIES

TOTAL NET WORTH	\$ _____	\$ _____	\$ _____
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GRANT TOTAL NET WORTH	\$ _____
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Anticipated Liabilities

Do you have any reasonably anticipated debts, liabilities, or exposures to liability due to any reason, i.e., contractual, business, accident, malpractice (if applicable), etc.? If so, list the potential claimant, the amount potentially due, if ascertainable, and the cause of potential liability.

Acknowledgement

We have prepared this form with the understanding that it will be relied on for asset protection planning advice, and any material omissions, overstated or understated amounts, or inaccurate ownership information may cause that advice to be inappropriate. We verify that the information furnished is complete and accurate and that you will not be making an independent investigation to confirm the data.

Husband

Wife

Signature

Signature