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Simple Will Package Questionnaire and Retainer Agreement

To assist in the preparation of your Simple Will, General Power of Attorney, Healthcare Power of Attorney, and Living Will, we request that you review and complete this questionnaire completely. These questions are designed to assist the attorney in completing the documents on your behalf in an extremely efficient manner. If you have any questions or concerns, please make note of them so they can be discussed during the phone consultation.

THIS QUESTIONNAIRE AND RETAINER AGREEMENT IS DESIGNED ONLY FOR THOSE CLIENTS WHO WANT THE SIMPLEST OF ESTATE PLANS. FOR THE PRICE QUOTED, THE LAW OFFICE WILL PREPARE THE DOCUMENTS BASED ON THE INFORMATION PROVIDED HEREIN. THE PRICE QUOTED INCLUDES ONLY UP TO 30 MINUTES OF CONSULTATION TIME BY PHONE BEFORE ADDITIONAL FEES WILL BE IMPOSED.

A Simple Will Package is for people 18 or older who have a spouse or partner and want to leave everything to that spouse or partner. If they have children together, then everything goes to those children equally (or if deceased to their descendants) if both pass on; or if no children, then they wish for property to go equally to siblings or nieces and nephews. If it is a single or divorced individual, then everything goes to any children equally (or if deceased to their descendants); or if no children, then for property to go equally to siblings or nieces and nephews. (Please call if you have questions on these terms.)

In order to qualify for a Simple Will Package, the person:

- Must not want anything beyond a simple testamentary trust that distributes property to beneficiaries at a single specified age (usually 25)
- Must not have a combined potential taxable estate in excess of \$1 million (or by signing this agreement hereby release the law office from liability for any adverse estate tax consequences)
- Must not have any beneficiaries with special needs

The Simple Will Package does not name more than one person to be an executor at any given time (in other words, no “co-executors”), it does not avoid probate like a living trust, and it does not have complicated distribution scenarios. *If your situation is different than listed above, then you need something more than a simple will package.*

If you have questions regarding whether or not your situation warrants something greater than a Simple Will Package, then please contact the office at the above phone number.

Upon completion of this questionnaire, please fax it to (919) 844-7995 or e-mail a scanned copy to office@livingtrustlawfirm.com or mail it to:

The Law Offices of Jeffrey G. Marsocci, PLLC
8406 Six Forks Road, Suite 102
Raleigh, North Carolina 27615

Date: _____
Client One - First Name/MI/Last Name : _____

US Citizen: Yes ___ No___ If No, please list status: _____

Married: Yes ___ No___ Gender: Male___ Female___

Social Security No. : _____

Birth Date: ____/____/____ Birthplace: _____

Street Address: _____

City/State/Zip: _____ County: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ E-mail Address: _____

Father's name: _____

Birthplace (Include City and State): _____

Mother's name (Use Maiden Name): _____

Birthplace (Include City and State): _____

Client Two – (Spouse/Partner):

First/MI/Last Name: _____

US Citizen: Yes ___ No___ If No, please list status: _____

Married: Yes ___ No___ Gender: Male___ Female___

Social Security No. : _____

Birth Date: ____/____/____ Birthplace: _____

Address if different from above: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ E-mail Address: _____

Father's name: _____

Birthplace (Include City and State): _____

Mother's name (Use Maiden Name): _____

Birthplace (Include City and State): _____

Please list the name of the person or source (internet, advertisement, etc.) who referred us to you:

CHILDREN:

Please list all children you have. In the section listed as "By", please write F if the child is only by the father, M if the child is only by the mother, or B if the child is from both of the clients.

Name	Date of Birth	City/State of Residence	By
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Are any of the above children deceased? If so please list below along with any descendants that child may have. _____

FOR PURPOSES OF A SIMPLE WILL PACKAGE, YOUR SPOUSE OR PARTNER AS LISTED ABOVE WILL INHERIT YOUR ASSETS, AND THEN THE ABOVE-NAMED CHILDREN WILL EQUALLY INHERIT THE ASSETS WHEN THEY REACH A SPECIFIED AGE. IF YOU DO NOT HAVE A SPOUSE OR PARTNER LISTED ABOVE, THEN THE CHILDREN WILL INHERIT YOUR ASSETS AFTER YOU PASS ON WHEN THEY REACH THE SPECIFIED AGE.

AGE OF BENEFICIARIES

It is typical for property to be held in trust and administered by the named executor until they reach that age. Most clients choose ages ranging from 25 to 40, or later. It is not recommended that assets be left to children under 25, but this is not required. Please list the age you wish for younger beneficiaries to receive their inheritance.

Age: _____

CONTINGENT BENEFICIARIES:

Please check one option. In the event of the death of myself, any spouse or partner, and any and all children and their descendants, I want to leave all of my property to:

- All of my siblings equally, or if deceased, to their children and descendants.
- Skip my siblings. Give all of my assets to my nieces and nephews equally, or if any are deceased, then their share will go to their children and descendants.
- Other named people (MUST EQUAL 100%):

Name	Relationship to you	Percentage
_____	_____	_____
_____	_____	_____
_____	_____	_____

WILL EXECUTORS:

The Executor of a Will manages and distributes your assets upon your death or incompetency as well as handle any probate. People typically name their adult children, or close family members/friends to serve as the Executor. Many times, couples agree on picking the same people in the same order. This is highly recommended but not required. We also recommend that only *one* person serve as executor at any one time. This is to avoid any disagreements or delays in filing paperwork.

Client One (and Two):

First Will Executor: _____

Relation to You: _____

Second Will Executor : _____

Relation to You: _____

Third Will Executor: _____

Relation to You: _____

Client Two: (Only if different from the above-listed executors)

First Will Executor: _____

Relation to You: _____

Second Will Executor : _____

Relation to You: _____

Third Will Executor : _____

Relation to You: _____

FINANCIAL POWER OF ATTORNEY:

Who do you want to make financial decisions for you if you are not able to communicate your own wishes? It is suggested that you list at least three people in a set order to make these decisions for you. It is also highly recommended that you do not list more than one person to make these decisions at any given time.

For example, you may wish to have your spouse as your first agent, and then list your two adult children in order of age. However, we do not recommend that you list both children as joint second agents.

Client One:

First Financial Agent: _____

Relation to You: _____

Second Financial Agent: _____

Relation to You: _____

Third Financial Agent: _____

Relation to You: _____

Client Two:

First Financial Agent: _____

Relation to You: _____

Second Financial Agent: _____

Relation to You: _____

Third Financial Agent: _____

Relation to You: _____

HEALTHCARE POWER OF ATTORNEY:

Who do you want to make medical decisions for you if you are not able to communicate your own wishes? It is suggested that you list at least three people in a set order to make these decisions for you. For example, you may wish to have your spouse as your first agent, and then list your two adult children in order of age. However, we do not recommend that you list both children as your joint second agents.

Client One:

First Healthcare Agent: _____

Relation to You: _____

Second Healthcare Agent: _____

Relation to You: _____

Third Healthcare Agent: _____

Relation to You: _____

Client Two:

First Healthcare Agent: _____

Relation to You: _____

Second Healthcare Agent: _____

Relation to You: _____

Third Healthcare Agent: _____

Relation to You: _____

LIVING WILL

A Living Will is a document that describes your wishes regarding life support and artificial nutrition and hydration if you are medically in a persistent vegetative state or if you are terminal and incurable. Please check the box which best describes your wishes:

Client One (PLEASE CHECK ONE)

- If I am in a persistent vegetative state or terminal and incurable, then I DO NOT WANT life support or artificial nutrition and hydration.
- If I am in a persistent vegetative state or terminal and incurable, then I do not want life support but I DO WANT artificial nutrition and hydration.
- If I am in a persistent vegetative state or terminal and incurable, then I WANT life support and artificial nutrition and hydration to be administered.
- I do not want my wishes put into a Living Will and instead wish for my healthcare power of attorney agent to make any such decisions on my behalf.

Client Two (PLEASE CHECK ONE)

- If I am in a persistent vegetative state or terminal and incurable, then I DO NOT WANT life support or artificial nutrition and hydration.
- If I am in a persistent vegetative state or terminal and incurable, then I do not want life support but I DO WANT artificial nutrition and hydration.
- If I am in a persistent vegetative state or terminal and incurable, then I WANT life support and artificial nutrition and hydration to be administered.
- I do not want my wishes put into a Living Will and instead wish for my healthcare power of attorney agent to make any such decisions on my behalf.

GUARDIANS FOR MINORS:

The guardian is the individual who will have legal custody of any minor children you may have when you pass on. We highly recommend that you name *individuals, not couples* to handle these duties for you. For example, you may want to choose your brother and his wife. Since the person that is generally trusted is the brother, we would recommend that you name your brother only, not your sister-in-law. If there is a divorce, your brother could decline to serve as guardian. It is also recommended that couples agree on guardianship nominations, but this is not required.

Client One:

First Guardian: _____

Relation to You: _____

Second Guardian: _____

Relation to You: _____

Third Guardian: _____

Relation to You: _____

Client Two:

First Guardian: _____

Relation to You: _____

Second Guardian: _____

Relation to You: _____

Third Guardian: _____

Relation to You: _____

RETAINER AGREEMENT

The above written client or clients have requested that The Law Offices of Jeffrey G. Marsocci, PLLC act as their legal counsel with regard to the preparation of a Simple Will Package, including a simple Last Will and Testament, Healthcare Power of Attorney, General Power of Attorney, and Living Will. *The documents will be prepared in accordance with the information provided in this questionnaire.* The terms and conditions of engagement are as follows:

- The law office will prepare the documents listed above
- The law office will contact you with questions and to ensure that you in fact need a simple will package, and if appropriate we will proceed.
- The law office will spend no more than thirty minutes discussing your case for the price indicated below—additional time will be billed at the standard rate for the office in quarter hour increments, which is \$200 per hour for the attorney and \$50 per hour for legal assistants.
- The law office will supervise the execution of the documents during business hours during the week of April 30-May 4 at the Ameriprise offices at 5511 Capital Center Drive, Raleigh, NC 27606. In the event you are not able to arrange a time to sign the documents during the scheduled times, then you agree to schedule a signing at the law office after May 4, 2007.

In order for your simple wills to effectively hold property in trust for younger beneficiaries, you must list “ESTATE” as your primary beneficiary if you do not have a spouse or partner, or if you do have a spouse or partner, then you may list them as the primary beneficiary and then list “ESTATE” as your contingent beneficiary. While this means that account or asset will have to go through the probate process, it means that the asset will be held in trust for the underage beneficiary until the age you specified. *You agree to be responsible for making these changes.*

Confidentiality

If this retainer agreement is applying to a couple, you both have read the foregoing and understand there are potential conflicts of interest between you in the estate planning process. You consent to having me represent both of you to prepare an estate plan and the documents specified herein. You understand that between yourselves and me, there are no confidential communications because I represent both of you.

Understanding

You understand that a fixed fee will be paid to our office. You understand that once the computer documents are created, in either draft or final form, the fixed fee paid to the law office is nonrefundable. It is also your understanding that all documents that may be electronically sent to you will be done in a format that is not typically subject to editing, and you covenant and agree not to attempt to duplicate said documents. It is the policy of our firm not to transmit documents in an editable electronic format except in the event you choose to reside in another state, in which case upon request of a licensed attorney in said state we will transmit the documents to them directly.

Printing New Documents

In creating the above estate planning documents, our firm utilizes staff time, paper, and computer resources. Unfortunately, on occasion, a client does not appear on the scheduled day of signing (executing) their documents, or they fail to reschedule their appointment with more than 24 hours notice. When such a situation occurs, all of the documents, which have been dated, must be destroyed and reprinted with the correct date. If this is necessary, an additional \$50 will be charged to replace the documents.

******* DISCLAIMER AND HOLD HARMLESS AGREEMENT*******

I/We understand that there are many benefits of using a Revocable Living Trust to avoid probate, I/we have been offered information regarding Revocable Living Trusts, and I/we have specifically chosen not to have a Revocable Living Trust established at this time. I/we specifically bind ourselves, our heirs, agents, assigns and representatives of any kind from taking action against The Law Offices of Jeffrey G. Marsocci, PLLC because of any and all added costs or problems encountered because I/we chose to use a Last Will and Testament rather than a Revocable Living Trust for my/our estate plan.

If these terms express your understanding of our agreement, then please indicate your consent at the bottom by signing. This agreement accompanied by your retainer payment will constitute not only our retainer agreement, but full authorization for The Law Offices of Jeffrey G. Marsocci, PLLC to act in your behalf as your legal counsel for the matters referred to herein. Agreed to on the above date.

Jeffrey G. Marsocci, Attorney at Law
The Law Offices of Jeffrey G. Marsocci, PLLC

Agreed to:

Client 1 as listed above

Client 2 as listed above

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