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EVAN H. FARR, CEA, CELA
Certified Estate Advisor
National Association of
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Certified Elder Law Attorney
National Elder Law Foundation*

*Helping Individuals,
Families, and Small Businesses
in the Protection, Preservation
and Transfer of Wealth*

WILLS, TRUSTS AND ESTATE PLANNING INTAKE QUESTIONNAIRE

Thank you choosing our firm for your planning needs. The information you provide in this questionnaire will be used to help you organize your personal and financial information so that we can properly assess your current situation and evaluate what planning documents are appropriate for you. Whether you want just a basic will or a more complicated estate or asset protection plan, the information requested in this form is essential in order for us to give you proper advice and recommendations. Please complete this form to the best of your ability, and be sure to bring this completed form with you to your initial office consultation. If you haven't already scheduled your initial consultation, please call the office at your convenience to do so.

Because many of our clients and most of our staff are sensitive and/or allergic to strong fragrances, we kindly ask that you please refrain from wearing any perfume, cologne, or aftershave to our office.

If you are unmarried, or if you are married but desire to implement an estate plan separately from your spouse, simply fill out one side of the intake form. If you are married and desire to implement a joint estate plan with your spouse, before completing the intake form please read and sign the section on the next page entitled "Information For Married Couples." If you are unable physically to complete the intake form by yourself and someone is assisting you in filling out the form, please read and sign the section on the next page entitled "Information for Elderly or Disabled Clients."

WHO MAY BE PRESENT DURING YOUR CONSULTATION: As a general rule, family members, or anyone else who is going to be mentioned in any of your documents, are not permitted to be present during consultations and document signings. There are many reasons for meeting alone with the client – to make clear to everyone whom we represent, to protect attorney-client confidentiality and, in the case of elderly or disabled clients, to assess client capacity. All of these safeguards protect not just the client, but also protect the client's family against potential claims of undue influence. Please [click here](#) for a detailed informational brochure about this topic.

FEES: You will find our fee schedule at the end of the attached intake form. Please sign below indicating that you are aware of our fee schedule and have had a chance to review it prior to your appointment.

Date

Signature

Date

Signature

INFORMATION FOR ELDERLY OR DISABLED CLIENTS: To the extent possible, the client (i.e., the person or couple for whom estate planning is being done) should complete the attached intake questionnaire without assistance from anyone else. If assistance is required in completing the form, then please indicate below the names of all people who assisted the client in completing the form, and sign below indicating that you have read the completed form or had it read to you and that the completed responses on the form accurately express your wishes.

The following person(s) helped me complete the attached intake questionnaire:

Even though the above-listed person(s) helped me complete the attached intake questionnaire, I have read the completed intake questionnaire form or had it read to me and the completed responses on the form accurately express my wishes.

Date _____ Client Signature _____

Date _____ Client Signature _____

INFORMATION FOR MARRIED COUPLES: If you are married, please note that you have the option of hiring separate attorneys for your estate planning needs. Though the goals of most married persons are the same when it comes to wills, trusts, and estate planning, many married individuals (especially individuals that have children from prior marriages) have differing views on the ownership of property, the identity of beneficiaries, the identity of executors, trustees and guardians, etc. Likewise, some married individuals have secrets -- private, confidential, or embarrassing information that they do not wish to share with their spouse -- information that may be essential to the estate planning process and will therefore have to be disclosed to the attorney and, therefore, disclosed to the spouse if we are representing both spouses. Additionally, sometimes married individuals have "awkward" questions that they desire to ask the attorney -- questions that they would not be comfortable asking in the presence of their spouse, such as how a divorce might affect their estate plan.

By obtaining separate attorneys, you would be able to: (1) share in confidence any secrets or private information with your attorney that may be important to the estate planning process; (2) ask in confidence whatever questions you may have; and (3) receive completely confidential advice and counsel. By having us represent you jointly, you will be waiving and losing all 3 of the above rights with respect to your spouse. If you do decide to obtain separate attorneys, this firm would be pleased to represent either one of you separately.

By signing below, we acknowledge that we have the right to obtain separate attorneys, but after careful consideration we desire to waive that right and have you represent both of us in connection with our estate planning needs; we understand that we are waiving and losing the rights described above with respect to each other. We also understand that both spouses must be present (either in person or by telephone) for the initial office consultation and all future consultations and signings.

Date _____ Signature _____

Date _____ Signature _____

Note: If you decide to have this firm represent both of you, please sign above and then complete this form jointly (please **do not** fill out two separate forms), using one side for each spouse. For a response that is the same for both spouses, you do not need to fill in both sides - just write "same." Please also note that both spouses **must** be present (either in person or by telephone) for the initial office consultation and all future consultations.

Thank you again for choosing the Farr Law Firm for your estate planning needs. We know that you have a choice of many fine attorneys here in Northern Virginia; we are honored by the trust you will be placing in us, and we will strive to do our best to achieve your goals and exceed your expectations.

PERSONAL INFORMATION

State the names requested below exactly as you want them to appear in your Will and other estate planning documents. Where the space on the form is insufficient, please attach an additional sheet.

Name: _____ <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Dr. <input type="checkbox"/> Ms.	Name: _____ <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Dr. <input type="checkbox"/> Ms.
Work Phone: _____ Answering machine or voice mail on this line? <input type="checkbox"/> Yes <input type="checkbox"/> No May we leave you messages? <input type="checkbox"/> Yes <input type="checkbox"/> No	Work Phone: _____ Answering machine or voice mail on this line? <input type="checkbox"/> Yes <input type="checkbox"/> No May we leave you messages? <input type="checkbox"/> Yes <input type="checkbox"/> No
Home Phone: _____ Answering machine or voice mail on this line? <input type="checkbox"/> Yes <input type="checkbox"/> No May we leave you messages? <input type="checkbox"/> Yes <input type="checkbox"/> No	Home Phone: _____ Answering machine or voice mail on this line? <input type="checkbox"/> Yes <input type="checkbox"/> No May we leave you messages? <input type="checkbox"/> Yes <input type="checkbox"/> No
Home Address: _____ _____	Home Address: _____ _____
Cell Phone: _____ May we leave you messages? <input type="checkbox"/> Yes <input type="checkbox"/> No	Cell Phone: _____ May we leave you messages? <input type="checkbox"/> Yes <input type="checkbox"/> No
Email Address: _____ May we communicate via email about estate planning? <input type="checkbox"/> Yes <input type="checkbox"/> No Would you like to receive our estate planning newsletter? <input type="checkbox"/> Yes <input type="checkbox"/> No	Email Address: _____ May we communicate via email about estate planning? <input type="checkbox"/> Yes <input type="checkbox"/> No Would you like to receive our estate planning newsletter? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name of Business/Employer: _____ Work Address: _____ _____	Name of Business/Employer: _____ Work Address: _____ _____
Fax Number: _____ Must we call first to tell you we are sending a fax? <input type="checkbox"/> Yes <input type="checkbox"/> No	Fax Number: _____ Must we call first to tell you we are sending a fax? <input type="checkbox"/> Yes <input type="checkbox"/> No
Place of Birth: _____	Place of Birth: _____
Date of Birth: _____	Date of Birth: _____
Social Security Number: _____	Social Security Number: _____
Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Widowed	Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Widowed
If currently married, date of marriage: _____ Place of Marriage: _____ Name of current spouse: _____ Prior spouse(s): Name: _____ <input type="checkbox"/> Divorced <input type="checkbox"/> Deceased - date: _____ Name: _____ <input type="checkbox"/> Divorced <input type="checkbox"/> Deceased - date: _____ Name: _____ <input type="checkbox"/> Divorced <input type="checkbox"/> Deceased - date: _____	If currently married, date of marriage: _____ Place of Marriage: _____ Name of current spouse: _____ Prior spouse(s): Name: _____ <input type="checkbox"/> Divorced <input type="checkbox"/> Deceased - date: _____ Name: _____ <input type="checkbox"/> Divorced <input type="checkbox"/> Deceased - date: _____ Name: _____ <input type="checkbox"/> Divorced <input type="checkbox"/> Deceased - date: _____

Have you ever used any other name? <input type="checkbox"/> Yes <input type="checkbox"/> No Where? _____ Why? _____	Have you ever used any other name? <input type="checkbox"/> Yes <input type="checkbox"/> No Where? _____ Why? _____
Do you plan to pay for a beneficiary's education? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you plan to pay for a beneficiary's education? <input type="checkbox"/> Yes <input type="checkbox"/> No
Do you plan to pay for a beneficiary's wedding? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you plan to pay for a beneficiary's wedding? <input type="checkbox"/> Yes <input type="checkbox"/> No
Do you plan to help a beneficiary buy 1 st home? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you plan to help a beneficiary buy 1 st home? <input type="checkbox"/> Yes <input type="checkbox"/> No
Do you expect to care for an aging parent? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you expect to care for an aging parent? <input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have any beneficiary with special needs? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have any beneficiary with special needs? <input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have long-term care insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have long-term care insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have a favorite charity? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have a favorite charity? <input type="checkbox"/> Yes <input type="checkbox"/> No
If you have children, how important is it for you to leave as much of your estate as possible to your children? <input type="checkbox"/> Very important <input type="checkbox"/> Fairly important <input type="checkbox"/> Slightly important <input type="checkbox"/> Not important	If you have children, how important is it to you to leave as much of your estate as possible to your children? <input type="checkbox"/> Very important <input type="checkbox"/> Fairly important <input type="checkbox"/> Slightly important <input type="checkbox"/> Not important
Do you have any of the following legal documents? Last Will and Testament <input type="checkbox"/> No <input type="checkbox"/> Yes, dated: _____ Revocable Living Trust <input type="checkbox"/> No <input type="checkbox"/> Yes, dated: _____ Living Will <input type="checkbox"/> No <input type="checkbox"/> Yes, dated: _____ Health Care POA <input type="checkbox"/> No <input type="checkbox"/> Yes, dated: _____ Durable Financial POA <input type="checkbox"/> No <input type="checkbox"/> Yes, dated: _____ Other: _____ <input type="checkbox"/> No <input type="checkbox"/> Yes, dated: _____	Do you have any of the following legal documents? Last Will and Testament <input type="checkbox"/> No <input type="checkbox"/> Yes, dated: _____ Revocable Living Trust <input type="checkbox"/> No <input type="checkbox"/> Yes, dated: _____ Living Will <input type="checkbox"/> No <input type="checkbox"/> Yes, dated: _____ Health Care POA <input type="checkbox"/> No <input type="checkbox"/> Yes, dated: _____ Durable Financial POA <input type="checkbox"/> No <input type="checkbox"/> Yes, dated: _____ Other: _____ <input type="checkbox"/> No <input type="checkbox"/> Yes, dated: _____
Are you a citizen of the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you a citizen of the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are you now or have you ever been in the Military Service of the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you now or have you ever been in the Military Service of the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No

Name and Contact Info of Personal Advisors:		Name and Contact Info of Personal Advisors:	
Tax Accountant:	Name: _____ Phone: _____ Email: _____ May we talk to this person about your estate plan if needed? <input type="checkbox"/> Yes <input type="checkbox"/> No	Tax Accountant:	Name: _____ Phone: _____ Email: _____ May we talk to this person about your estate plan if needed? <input type="checkbox"/> Yes <input type="checkbox"/> No
Financial Planner:	Name: _____ Phone: _____ Email: _____ May we talk to this person about your estate plan if needed? <input type="checkbox"/> Yes <input type="checkbox"/> No	Financial Planner:	Name: _____ Phone: _____ Email: _____ May we talk to this person about your estate plan if needed? <input type="checkbox"/> Yes <input type="checkbox"/> No
Life Ins. Agent:	Name: _____ Phone: _____ Email: _____ May we talk to this person about your estate plan if needed? <input type="checkbox"/> Yes <input type="checkbox"/> No	Life Ins. Agent:	Name: _____ Phone: _____ Email: _____ May we talk to this person about your estate plan if needed? <input type="checkbox"/> Yes <input type="checkbox"/> No
Safe Deposit Box Information: Bank: Name: _____ Branch Location: _____ Box Number: _____ Registered to: <input type="checkbox"/> Self <input type="checkbox"/> Self & Spouse		Safe Deposit Box Information: Bank: Name: _____ Branch Location: _____ Box Number: _____ Registered to: <input type="checkbox"/> Self <input type="checkbox"/> Self & Spouse	

COMPREHENSIVE CONTACT INFORMATION

Using the next two pages (and, if necessary additional sheets), please identify all of your children and all other individuals whom you will be naming either as beneficiaries or guardians or fiduciaries (i.e., executors, trustees, or agents under a medical or financial power of attorney) -- in other words, everyone that you mention anywhere else in this intake form). Please also be sure to also fill in each person's relationship to you; you may use the following relationship codes if desired:

Children: CB = Child of Both | HC = Husband's Child | WC = Wife's Child | ACB = Adopted Child of Both | HAC = Husband's Adopted Child
 WAC = Wife's Adopted Child | DCC = Deceased Child w / Children | DCN = Deceased Child w / No Children

Siblings: HB = Husband's Brother | HS=Husband's Sister | WB = Wife's Brother | WS = Wife's Sister

Other: HN = Husband's Niece/Nephew | WN = Wife's Niece/Nephew | HP = Husband's Parent | WP = Wife's Parent | F = Friend | G = Godchild

1. Name: _____ Relationship: _____ Age: _____ Email: _____ Address: _____ Cty/St/Zip: _____ Home Phone: _____ Work Phone: _____ Mobile Phone: _____ Spouse Name: _____ Age: _____ Number of children: _____	1. Name: _____ Relationship: _____ Age: _____ Email: _____ Address: _____ Cty/St/Zip: _____ Home Phone: _____ Work Phone: _____ Mobile Phone: _____ Spouse Name: _____ Age: _____ Number of children: _____
2. Name: _____ Relationship: _____ Age: _____ Email: _____ Address: _____ Cty/St/Zip: _____ Home Phone: _____ Work Phone: _____ Mobile Phone: _____ Spouse Name: _____ Age: _____ Number of children: _____	2. Name: _____ Relationship: _____ Age: _____ Email: _____ Address: _____ Cty/St/Zip: _____ Home Phone: _____ Work Phone: _____ Mobile Phone: _____ Spouse Name: _____ Age: _____ Number of children: _____
3. Name: _____ Relationship: _____ Age: _____ Email: _____ Address: _____ Cty/St/Zip: _____ Home Phone: _____ Work Phone: _____ Mobile Phone: _____ Spouse Name: _____ Age: _____ Number of children: _____	3. Name: _____ Relationship: _____ Age: _____ Email: _____ Address: _____ Cty/St/Zip: _____ Home Phone: _____ Work Phone: _____ Mobile Phone: _____ Spouse Name: _____ Age: _____ Number of children: _____

<p>4. Name: _____ Relationship: _____ Age: _____ Email: _____ Address: _____ Cty/St/Zip: _____ Home Phone: _____ Work Phone: _____ Mobile Phone: _____ Spouse Name: _____ Age: _____ Number of children: _____</p>	<p>4. Name: _____ Relationship: _____ Age: _____ Email: _____ Address: _____ Cty/St/Zip: _____ Home Phone: _____ Work Phone: _____ Mobile Phone: _____ Spouse Name: _____ Age: _____ Number of children: _____</p>
<p>5. Name: _____ Relationship: _____ Age: _____ Email: _____ Address: _____ Cty/St/Zip: _____ Home Phone: _____ Work Phone: _____ Mobile Phone: _____ Spouse Name: _____ Age: _____ Number of children: _____</p>	<p>5. Name: _____ Relationship: _____ Age: _____ Email: _____ Address: _____ Cty/St/Zip: _____ Home Phone: _____ Work Phone: _____ Mobile Phone: _____ Spouse Name: _____ Age: _____ Number of children: _____</p>
<p>6. Name: _____ Relationship: _____ Age: _____ Email: _____ Address: _____ Cty/St/Zip: _____ Home Phone: _____ Work Phone: _____ Mobile Phone: _____ Spouse Name: _____ Age: _____ Number of children: _____</p>	<p>6. Name: _____ Relationship: _____ Age: _____ Email: _____ Address: _____ Cty/St/Zip: _____ Home Phone: _____ Work Phone: _____ Mobile Phone: _____ Spouse Name: _____ Age: _____ Number of children: _____</p>
<p>7. Name: _____ Relationship: _____ Age: _____ Email: _____ Address: _____ Cty/St/Zip: _____ Home Phone: _____ Work Phone: _____ Mobile Phone: _____ Spouse Name: _____ Age: _____ Number of children: _____</p>	<p>7. Name: _____ Relationship: _____ Age: _____ Email: _____ Address: _____ Cty/St/Zip: _____ Home Phone: _____ Work Phone: _____ Mobile Phone: _____ Spouse Name: _____ Age: _____ Number of children: _____</p>

PRIOR AGREEMENTS.

Please indicate whether you are a party to any of the following types of agreements and, if so, bring copies:

Pre-Marital Agreement	<input type="checkbox"/> Yes <input type="checkbox"/> No	Pre-Marital Agreement	<input type="checkbox"/> Yes <input type="checkbox"/> No
Post-Marital Agreement	<input type="checkbox"/> Yes <input type="checkbox"/> No	Post-Marital Agreement	<input type="checkbox"/> Yes <input type="checkbox"/> No
Property Settlement Agreement	<input type="checkbox"/> Yes <input type="checkbox"/> No	Property Settlement Agreement	<input type="checkbox"/> Yes <input type="checkbox"/> No
Property Co-Ownership Agreement	<input type="checkbox"/> Yes <input type="checkbox"/> No	Property Co-Ownership Agreement	<input type="checkbox"/> Yes <input type="checkbox"/> No
Buy-Sell / Shareholder Agreement	<input type="checkbox"/> Yes <input type="checkbox"/> No	Buy-Sell / Shareholder Agreement	<input type="checkbox"/> Yes <input type="checkbox"/> No
529 College Savings Plan Agreement	<input type="checkbox"/> Yes <input type="checkbox"/> No	529 College Savings Plan Agreement	<input type="checkbox"/> Yes <input type="checkbox"/> No

COMMENTS: _____

SPECIAL MONETARY BEQUESTS.

Using the table below, please list any special bequests that you would like to make, i.e., specific *amounts of money or percentages of your estate* that you would like to give to specific persons or institutions (including any charities) upon your death, **prior to the distribution of your residuary estate**. Please do not list personal effects or specific items of tangible personal property such as clothing, jewelry, furniture, furnishings, household goods, and vehicles, as these items may be disposed of via your Tangible Personal Property Directive (TPPD). We will provide you with a sample TPPD form in connection with your will. If you decide to use the TPPD, you will fill it out yourself and you can then add to it or modify it at any time, and simply keep an updated copy with your Will.

Beneficiary	Percentage

Beneficiary	Percentage

REAL ESTATE.

Please indicate below how your real estate should be distributed upon your death. There are several points to consider in deciding how to dispose of your real estate upon your death. If you request that your executor or trustee sell your real estate, then the sales costs (commission, closing costs, legal fees, etc.) will be tax deductible and may therefore reduce your estate tax if you have a taxable estate. If one parcel of real estate goes directly to multiple people, then all of these people will have to agree on what to do with the property; if they can't agree, then someone will have to go to court to have the property partitioned or sold judicially, or if the property is mortgaged and the mortgage is not paid off from the estate, the mortgage lender might wind up foreclosing on the property. Because of these factors, if you are leaving one parcel of real estate to multiple beneficiaries, it is generally recommended that you have your executor or trustee sell the property and distribute the proceeds. If you own more than one parcel of real estate, please list them below or on an attached sheet and indicate how each parcel should be distributed upon your death.

<input type="checkbox"/> Real estate to my spouse; if my spouse dies before me, then to my children in equal shares.	<input type="checkbox"/> Real estate to my spouse; if my spouse dies before me, then to my children in equal shares.
<input type="checkbox"/> To my children, in equal shares.	<input type="checkbox"/> To my children, in equal shares.
<input type="checkbox"/> Sell my real estate and distribute the net proceeds as part of my residuary estate.	<input type="checkbox"/> Sell my real estate and distribute the net proceeds as part of my residuary estate.
<input type="checkbox"/> Real estate to my spouse; if my spouse dies before me, then sell my real estate and distribute the net proceeds as part of my residuary estate.	<input type="checkbox"/> Real estate to my spouse; if my spouse dies before me, then sell my real estate and distribute the net proceeds as part of my residuary estate.
<input type="checkbox"/> Keep real estate in living trust and let trustee decide whether to hold, sell, or distribute the real estate directly to the beneficiaries of the trust.	<input type="checkbox"/> Keep real estate in living trust and let trustee decide whether to hold, sell, or distribute the real estate directly to the beneficiaries of the trust.
<input type="checkbox"/> As described below or on the attached sheet.	<input type="checkbox"/> As described below or on the attached sheet.

RESIDUARY ESTATE.

Please indicate below how your residuary estate should be distributed upon your death. Your *residuary estate* is comprised of the liquidated value of all your financial assets remaining in your trust or estate after satisfaction of your specific monetary bequests listed above. Real estate is not part of your residuary estate unless you have requested that your real estate be sold and the proceeds be added to your residuary estate. Unless you request otherwise, the share of a deceased beneficiary will be distributed to that beneficiary's living children in equal shares; or if the deceased beneficiary has no living children, then the deceased beneficiary's share would be redistributed proportionally among your other residuary beneficiaries.

<input type="checkbox"/> All to my spouse or, if my spouse predeceases me, then to my children in equal shares.	<input type="checkbox"/> All to my spouse or, if my spouse predeceases me, then to my children in equal shares.
<input type="checkbox"/> All to my children, in equal shares.	<input type="checkbox"/> All to my children, in equal shares.
<input type="checkbox"/> All to the charities designated below, in equal shares.	<input type="checkbox"/> All to the charities designated below, in equal shares.
<input type="checkbox"/> As described below or on the attached sheet.	<input type="checkbox"/> As described below or on the attached sheet.

GUARDIANS FOR MINOR CHILDREN.

If you have minor children (under age 18), you must designate in your will a guardian or co-guardians to raise the children in the event of the death of both parents. If you name a married couple as co-guardians, please also indicate whether you would want one of the co-guardians to act as sole guardian in the event that the other co-guardian dies or is otherwise unable to act; please also indicate whether you would want one of the co-guardians to serve as sole guardian if the couple were to separate or divorce. H and W below stand for Husband and Wife.

<p>Guardian(s): H Name: _____ W Name: _____ If H dies or is otherwise unable, may W act as sole guardian? <input type="checkbox"/> Yes <input type="checkbox"/> No If W dies or is otherwise unable, may H act as sole guardian? <input type="checkbox"/> Yes <input type="checkbox"/> No If H & W separate or divorce, who should become guardian? <input type="checkbox"/> H <input type="checkbox"/> W <input type="checkbox"/> neither</p>	<p>Guardian(s): H Name: _____ W Name: _____ If H dies or is otherwise unable, may W act as sole guardian? <input type="checkbox"/> Yes <input type="checkbox"/> No If W dies or is otherwise unable, may H act as sole guardian? <input type="checkbox"/> Yes <input type="checkbox"/> No If H & W separate or divorce, who should become guardian? <input type="checkbox"/> H <input type="checkbox"/> W <input type="checkbox"/> neither</p>
<p>1st Successor Guardian(s): H Name: _____ W Name: _____ If H dies or is otherwise unable, may W act as sole guardian? <input type="checkbox"/> Yes <input type="checkbox"/> No If W dies or is otherwise unable, may H act as sole guardian? <input type="checkbox"/> Yes <input type="checkbox"/> No If H & W separate or divorce, who should become guardian? <input type="checkbox"/> H <input type="checkbox"/> W <input type="checkbox"/> neither</p>	<p>1st Successor Guardian(s): H Name: _____ W Name: _____ If H dies or is otherwise unable, may W act as sole guardian? <input type="checkbox"/> Yes <input type="checkbox"/> No If W dies or is otherwise unable, may H act as sole guardian? <input type="checkbox"/> Yes <input type="checkbox"/> No If H & W separate or divorce, who should become guardian? <input type="checkbox"/> H <input type="checkbox"/> W <input type="checkbox"/> neither</p>
<p>2nd Successor Guardian(s): H Name: _____ W Name: _____ If H dies or is otherwise unable, may W act as sole guardian? <input type="checkbox"/> Yes <input type="checkbox"/> No If W dies or is otherwise unable, may H act as sole guardian? <input type="checkbox"/> Yes <input type="checkbox"/> No If H & W separate or divorce, who should become guardian? <input type="checkbox"/> H <input type="checkbox"/> W</p>	<p>2nd Successor Guardian(s): H Name: _____ W Name: _____ If H dies or is otherwise unable, may W act as sole guardian? <input type="checkbox"/> Yes <input type="checkbox"/> No If W dies or is otherwise unable, may H act as sole guardian? <input type="checkbox"/> Yes <input type="checkbox"/> No If H & W separate or divorce, who should become guardian? <input type="checkbox"/> H <input type="checkbox"/> W</p>

Additional Questions About Your Guardians.

<p>Should the acting Guardian(s) be permitted to live in your family's home, rent-free, until the Guardianship is terminated? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Should the acting Guardian(s) be permitted to live in your family's home, rent-free, until the Guardianship is terminated? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
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EXPLANATION OF PROBATE:

Using a Last Will & Testament (Will) as your primary estate planning tool means that your estate will go through probate upon your death. It is important to note, however, that the only assets that must go through probate are assets that you own that are not in a living trust (more on living trusts later) and do not have a joint owner or a named beneficiary. Although the probate process is quite complicated and time-consuming for the executor, it is important to understand that the purpose of probate is to provide some measure of protection for your beneficiaries.

PHASE 1 OF PROBATE: To initiate the probate process, your named executor will have to make at least one appearance at the probate office to officially "qualify" and be "sworn in" as executor. Once qualified, your executor is accountable to the probate court and is required to prepare and file various legal and financial documents, including a detailed initial inventory of your estate and detailed annual accountings showing everything coming in to and going out of the estate. During the initial phase of probate, the executor must see to it that all your assets are accounted for and that any valid debts, expenses, and taxes are paid. There are limitations during this initial probate phase as to how much the executor may distribute as support to your spouse and/or minor children. After at least one year from your date of death (and often significantly longer), the Executor may distribute your remaining assets either:

- (a) to the beneficiaries you have named;
- (b) to the trustee named in your Will (if your Will has testamentary trust provisions, typically because your beneficiaries are under a specified age), to be held and administered according to the testamentary trust provisions set forth in your Will and subject to ongoing probate; or
- (c) to the trustee named in your Living Trust (if you have a Living Trust) to be held outside of probate and administered according to the terms set forth in your Living Trust, free of any court supervision.

PHASE 2 OF PROBATE: If your Will has provisions for the creation of a testamentary trust upon the conclusion of the initial phase of probate, then the testamentary trustee named in your Will is accountable to the probate court and, just like the executor, is required to prepare and file various legal and financial documents, including a detailed initial inventory of the trust and detailed accountings showing everything coming in to and going out of the trust every year. During this second phase of probate, the trustee must see to it that all trust assets are accounted for and that any valid debts, expenses, and taxes are paid from the trust when due. Upon the occurrence of a predetermined event (typically a beneficiary reaching a specified age), the trustee may then terminate the trust by distributing all remaining assets to your named beneficiaries.

EXPLANATION OF LIVING TRUSTS.

A trust is a legal entity which is capable of owning financial assets, real estate, and/or other property. A *testamentary trust*, as explained above, is a trust created by the Probate Court pursuant to trust provisions written into your Last Will & Testament. A testamentary trust does not take effect until after your death and generally not until after your Executor has completed the initial phase of probate.

A *living trust* is a trust that you create while you are living. Using a living trust as your primary estate planning tool means that your estate will not go through probate upon your death. You create a living trust by signing a contractual document called a "Declaration of Trust." You are typically the trustee of your own trust until your death. Upon your death, a successor trustee whom you have named takes over as trustee of the trust and, after paying any valid debts, expenses, and taxes, distributes the trust assets to or for the benefit of your named beneficiaries or, if called for in the trust, continues to hold the trust assets until the occurrence of a predetermined event. The main feature of a living trust is that the trustee is not accountable to the court, and therefore not subject to probate. Many people therefore use a living trust as their primary estate planning tool in order to make things easier for their trusted loved ones by avoiding the time and complications of probate. There may also be some advantages to you by using a living trust to consolidate your assets and simplify your finances. On the other hand, some people like the idea of court supervision and therefore prefer that their estate go through probate, and some people simply prefer not to spend the extra money it typically takes to create a living trust.

FINANCIAL REPRESENTATIVES. Please indicate below who you would like to serve as your financial representative (i.e., Agent under your Power of Attorney, Executor of your Will, and Trustee of any Trust). You may choose to have co-representatives. Naming co-representatives creates a built-in balancing of powers, but at the same time may cause conflict (if either can act separately) or more difficult administration (if both are required to act together). If you nominate co-representatives, please indicate whether they must act together or may act separately.

Spouse Primary? <input type="checkbox"/> Yes <input type="checkbox"/> No	Spouse Primary? <input type="checkbox"/> Yes <input type="checkbox"/> No
Primary (after spouse, if applicable). 1. Name(s): _____ <input type="checkbox"/> Co-representatives must act together? <input type="checkbox"/> Co-representatives may act separately?	Primary (after spouse, if applicable). 1. Name(s): _____ <input type="checkbox"/> Co-representatives must act together? <input type="checkbox"/> Co-representatives may act separately?
Alternate. 2. Name(s): _____ <input type="checkbox"/> Co-representatives must act together? <input type="checkbox"/> Co-representatives may act separately?	Alternate. 2. Name(s): _____ <input type="checkbox"/> Co-representatives must act together? <input type="checkbox"/> Co-representatives may act separately?
Alternate. 3. Name(s): _____ <input type="checkbox"/> Co-representatives must act together? <input type="checkbox"/> Co-representatives may act separately?	Alternate. 3. Name(s): _____ <input type="checkbox"/> Co-representatives must act together? <input type="checkbox"/> Co-representatives may act separately?

POWER OF ATTORNEY OPTIONS: Although powers of attorney have no “expiration date” under state law, we recommend that powers of attorney be re-executed annually due to the policies of some financial institutions. There are two basic types of power of attorney. An “immediate” power of attorney becomes effective from the moment you sign it. The immediate power of attorney is recommended because it is more likely to be accepted by financial institutions. A “springing” power of attorney becomes effective only upon medical certification (i.e., after two doctors have certified that you are unable to carry on your legal and financial affairs). For married couples, you may choose a “Combination” power that is effective immediately for your spouse, but springing for your alternates. Please indicate your desires by checking one of the below three options. Powers of attorney may be revoked by you at any time so long as you remain competent. An “immediate” power of attorney can be kept safe by not giving it to your agent until such time as you want or need your agent to start acting for you.

<input type="checkbox"/> Immediate Power of Attorney, Effective Upon Signing (Default Selection)	<input type="checkbox"/> Immediate Power of Attorney, Effective Upon Signing (Default Selection)
<input type="checkbox"/> Springing Power of Attorney, Effective Only Upon Medical Certification	<input type="checkbox"/> Springing Power of Attorney, Effective Only Upon Medical Certification
<input type="checkbox"/> Combination Power of Attorney: Effective Immediately for Spouse, but Only Upon Medical Certification for any alternates	<input type="checkbox"/> Combination Power of Attorney: Effective Immediately for Spouse, but Only Upon Medical Certification for any alternates

TRUST OPTIONS. Please indicate below the type of trust you prefer. If you haven't already, please read the information on the previous page which explains these different options.

<input type="checkbox"/> Living Trust (no probate)	<input type="checkbox"/> Testamentary Trust (part of Will and subject to probate)
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MEDICAL POWER OF ATTORNEY

A Medical Power of Attorney (also called a Health Care Power of Attorney or an Advance Medical Directive) authorizes another person (called your "Medical Agent"), to make decisions with respect to your medical care in the event that you are physically or mentally unable to do so, as certified by two physicians. This document includes the type of provisions that are commonly referred to as "Living Will" provisions allowing you to indicate your wishes concerning the use of heroic or extraordinary measures to prolong your life artificially in the event of a terminal illness or injury. You will also use this document to indicate your wishes with regard to organ donation, disposition of bodily remains, and funeral arrangements.

<input type="checkbox"/> Same as Executor	<input type="checkbox"/> Same as Executor
Primary Medical Agent 1. Name: _____	Primary Medical Agent 1. Name: _____
First Alternate Medical Agent 2. Name: _____	First Alternate Medical Agent 2. Name: _____
Second Alternate Medical Agent 3. Name: _____	Second Alternate Medical Agent 3. Name: _____

PETS

If you now own pets, or may in the future own pets, then you should have us include our standard "pet provision" in your Will or Living Trust. You must designate a Primary Pet Caretaker and, if desired, one or more Successor Pet Caretakers to care for each type of pet you may have (i.e., if you may have both a dog and a cat, you may designate a different caretaker for each; if you have or may have other types of pets, feel free to change the column headings and/or use additional sheets of paper). You should also designate a monetary distribution to go to the Pet Caretaker to be used for the care, feeding, and veterinary services for each pet. Our standard provision states that if all the Caretakers you have named are unable or unwilling to care for your pets, and a suitable alternative caretaker cannot be found, then the pets -- along with the monetary distribution -- will be given to Friends of Homeless Animals -- www.foha.org -- in Chantilly, Virginia. You may change this default if desired.

Primary Pet Caretaker for Dogs 1. Name: _____	Primary Pet Caretaker for Cats 1. Name: _____
First Successor Caretaker for Dogs 2. Name: _____	First Successor Caretaker for Cats 2. Name: _____
Second Successor Caretaker for Dogs 3. Name: _____	Second Successor Caretaker for Cats 3. Name: _____
Monetary Distribution Per Dog: \$ _____	Monetary Distribution Per Cat: \$ _____

DELAYED DISTRIBUTIONS.

If you have minor children or if you desire to delay final distribution of your estate until your children (or other beneficiaries) have reached what you feel will be an adequate level of maturity, you must choose from the three types of delayed distribution options explained below.

Step 1 - How Assets Are To Be Held: Please read the explanations after each of the following three options and then select one of the three options that best meets your desires with regard to how trust assets should be held:

<p><input type="checkbox"/> Option 1 -- Separate Trust Funds for Each Beneficiary: Most people select this option, which calls for each beneficiary's inheritance to be held by the trustee in a separate fund for each beneficiary. Whatever is left in each beneficiary's trust fund, if anything, will be distributed to that beneficiary when he or she attains the age(s) indicated below. This option is generally much easier for the trustee and it ensures that all of your beneficiaries are treated equally.</p>	<p><input type="checkbox"/> Option 2 - Single Trust Fund for Multiple Beneficiaries: This option calls for the entire inheritance to be held by the trustee in a single trust fund for the benefit of multiple beneficiaries. The trustee may make unequal distributions during the term of the trust. Whatever is left in the trust, if anything, will be distributed equally when your youngest beneficiary attains the age(s) indicated below. This option will allow the trustee to accommodate a particular beneficiary's needs by distributing more of the inheritance to that beneficiary during the term of the trust.</p>	<p><input type="checkbox"/> Option 3 - No Trust (Not Recommended): Beneficiary's inheritance may be paid, at the election of the executor, to the beneficiary, to a guardian or a custodian under a Uniform Gifts To Minors Act, OR the executor may hold the bequest until the beneficiary attains the age of 18 or 21. Whoever holds the funds may use the funds at any time for the health, education and support of the beneficiary, but whatever is left will be distributed directly to the beneficiary at the age indicated below (check one): <input type="checkbox"/> 18 or <input type="checkbox"/> 21</p>
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Step 2 - Support Options: Please read the explanations after each of the following support options and then select one of the three support options that best meets your desires with regard to providing support for your beneficiaries:

<p><input type="checkbox"/> Option A - Full Support Until Termination of Trust: This is the most commonly used support option. Under this option, the trustee may use any amount from the trust (income and principal), at any time, for the health, education and support of the beneficiary, until the trust is terminated at the final age selected below, at which time the trustee distributes the entire remaining trust balance (if anything) to the beneficiary(ies).</p>	<p><input type="checkbox"/> Option B - Full Support Until First Age-Based Distribution, then Income Only: If you select this support option, the trustee may use any amount from the trust (income and principal) for the health, education and support of the beneficiary, but only until the first age-based distribution selected below. After the first age-based distribution, the trustee shall distribute "income only" to the beneficiary until the final age-based distribution, at which time the trustee distributes the entire remaining trust balance (if anything) to the beneficiary(ies).</p>	<p><input type="checkbox"/> Option C - "Income Only": This option is most commonly used by grandparents and other relatives who are not ordinarily responsible for the direct support of the beneficiaries. Under this option, the trustee simply holds all assets in trust and distributes only the income until the ultimate age-based distribution, at which time the trustee distributes the entire principal trust balance to the beneficiary(ies).</p>
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TRUST TERMINATION AND AGE-BASED DISTRIBUTIONS

Select the age or milestone at which the trust is to terminate (along with any interim age-based distributions), at which time your beneficiaries receive their inheritances outright and can use the funds in any way they choose.

<input type="checkbox"/> All at age 23 <input type="checkbox"/> All at age 25 (default age if nothing checked) <input type="checkbox"/> All at age 30 <input type="checkbox"/> 1/2 at age 23, remainder at 25 <input type="checkbox"/> 1/2 at age 25, remainder at 30 <input type="checkbox"/> 1/3 at age 23, 1/2 of remainder at 25, balance at 30 <input type="checkbox"/> 1/3 at age 25, 1/2 of remainder at 30, balance at 35 <input type="checkbox"/> 1/2 at age _____, remainder at _____ <input type="checkbox"/> 1/3 at age _____, 1/2 of remainder at _____, balance at _____ <input type="checkbox"/> Immediately (all my beneficiaries are currently over 18) <input type="checkbox"/> Other (please specify on attached sheets)	<input type="checkbox"/> All at age 23 <input type="checkbox"/> All at age 25 (default age if nothing checked) <input type="checkbox"/> All at age 30 <input type="checkbox"/> 1/2 at age 23, remainder at 25 <input type="checkbox"/> 1/2 at age 25, remainder at 30 <input type="checkbox"/> 1/3 at age 23, 1/2 of remainder at 25, balance at 30 <input type="checkbox"/> 1/3 at age 25, 1/2 of remainder at 30, balance at 35 <input type="checkbox"/> 1/2 at age _____, remainder at _____ <input type="checkbox"/> 1/3 at age _____, 1/2 of remainder at _____, balance at _____ <input type="checkbox"/> Immediately (all my beneficiaries are currently over 18) <input type="checkbox"/> (please specify on attached sheets)
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TAX CONSIDERATIONS

<p>If you have children, how important is it to you to leave as much of your estate as possible to your children?</p> <input type="checkbox"/> Very important <input type="checkbox"/> Fairly important <input type="checkbox"/> Slightly important <input type="checkbox"/> Not important	<p>If you have children, how important is it to you to leave as much of your estate as possible to your children?</p> <input type="checkbox"/> Very important <input type="checkbox"/> Fairly important <input type="checkbox"/> Slightly important <input type="checkbox"/> Not important
<p>How important is it to you to arrange your affairs so as to minimize or avoid estate tax?</p> <input type="checkbox"/> Very important <input type="checkbox"/> Fairly important <input type="checkbox"/> Slightly important <input type="checkbox"/> Not important	<p>How important is it to you to arrange your affairs so as to minimize or avoid estate tax?</p> <input type="checkbox"/> Very important <input type="checkbox"/> Fairly important <input type="checkbox"/> Slightly important <input type="checkbox"/> Not important

HOW FEDERAL ESTATE TAX WORKS

Federal tax law allows an unlimited transfer of property to a surviving spouse without imposing any estate tax. This is a result of what is called the "unlimited marital deduction." In addition to the unlimited marital deduction, Federal tax law allows every individual to transfer a specific amount tax-free during his or her lifetime, or at death, to a beneficiary or beneficiaries other than a spouse. This amount, called the "exemption equivalent amount" or "unified credit amount," is currently scheduled to increase through the year 2009. In 2010, the federal estate tax is scheduled to be completely phased out, only to be reinstated the following year with the exemption back down to \$1,000,000. The current unified credit amount and the scheduled increases through 2011 are shown in the table to the right.

Without Tax Planning: Accordingly, if you are married and you leave everything to your spouse without proper tax planning, then upon your death your estate will not have to pay any federal estate taxes due to the effect of the unlimited marital deduction. However, upon the death of your spouse, all amounts in excess of the unified

ESTATE TAX EXEMPTION TABLE

Year	Exempt Amount
2002	\$1,000,000
2003	\$1,000,000
2004	\$1,500,000
2005	\$1,500,000
2006	\$2,000,000
2007	\$2,000,000
2008	\$2,000,000
2009	\$3,500,000
2010	unlimited
2011 +	\$1,000,000

credit amount will be subject to Estate Tax at rates starting at 37%. The highest taxable rate is 48% for the year 2004 and is reduced by one percentage point per year until 2007 when it hits 45%.

Example of Estate Tax Without Tax Planning:

For example, let's assume you and your spouse have a combined taxable estate of \$2,000,000 (note that your taxable estate included everything you own or have control over - including life insurance proceeds -- at the time of your death). If you were to die in the year 2004 leaving everything to your spouse, no estate taxes would be due at that time. If your spouse then were to die in the year 2005, the first \$ 1,500,000 would pass free of Estate Tax, but the remaining \$500,000 would be fully subject to Estate Tax. This is because your estate's Unified Credit was lost when you left everything to your surviving spouse under the unlimited marital deduction.

TAX PLANNING USING A FAMILY TRUST

The primary way to avoid or minimize this tax problem for most married couples is to establish an estate plan so that upon the death of the first spouse a "**Family Trust**" (also called a "**Credit Shelter Trust**" or "**ByPass Trust**") is created. The purpose of the Family Trust is to provide support for the surviving spouse during his or her lifetime, with the remainder of the trust then going to the children upon the death of the surviving spouse. Because the children are the ultimate beneficiaries of the Family Trust, the amount going into the Family Trust is able to qualify for the Unified Credit.

Example of an Estate Plan With a Family Trust:

Using the above example, upon your death your estate would be left to a Family Trust instead of directly to your spouse. Your spouse could be the trustee of the trust and would be allowed to receive all the income from the trust and 5% or five thousand dollars from the principal of the trust every year. Your spouse can even withdraw additional principal from the Family Trust so long as the money withdrawn is not used by your spouse to exceed the standard of living established while you were alive. Upon the death of your spouse, the Family Trust will terminate and whatever is left in the Family Trust will go to your children -- completely free of Estate Tax, even if the amount they receive has grown to be more than the amount that went into the trust at the time of your death.

TAX DECISIONS

Please select one of the options below:

<input type="checkbox"/>	We do not have a large enough estate to be concerned with estate tax issues, and therefore we have no need for tax planning. If selecting this option, please initial here: _____
<input type="checkbox"/>	We may have a large enough estate to warrant discussion of tax issues, but we do not wish to discuss tax planning at this time. If selecting this option, please initial here: _____
<input type="checkbox"/>	We are concerned with estate tax issues, and would like to discuss these issues with you further. If selecting this option, please initial here: _____
<input type="checkbox"/>	We are concerned with estate tax issues, and would like to establish an estate plan using a Credit Shelter Trust upon the death of the first spouse. If selecting this option, please initial here: _____

(Please go on to the next page.)

ESTATE PROTECTION:

Many married couples use a Family Trust (and sometimes an additional Marital Trust - a trust that qualifies for the marital deduction but places some restriction on the surviving spouse's use of the trust funds) in order to protect some of their estate for their children, guarding against the possible dissipation of the marital estate as the result of a surviving spouse becoming remarried and/or having additional children (whether through birth or adoption) and/or becoming a victim of fraud or deceit. To accomplish this, the surviving spouse's rights to the principal of the Family Trust (and/or the Marital Trust) are written either to terminate or be reduced in the event the surviving spouse becomes remarried or has additional children.

ESTATE PROTECTION DECISIONS: If you decide to establish an estate plan using a Family Trust (with or without a Marital Trust) upon the death of the first spouse, then you should also decide on certain variables concerning the surviving spouse's rights in the Family Trust. In the table below, please select one of the options in each of the two outside columns. These same options will apply to the Marital Trust if you elect to have a marital Trust.

Surviving Spouse Is Not Remarried	The Surviving Spouse Shall Receive All Income From the Family Trust and Shall Have the Following Rights to Distributions of Principal:	Surviving Spouse Remarries
<input type="checkbox"/>	Maximum Rights: (1) Five percent of the principal per year, plus (2) unlimited support without <i>regard to need</i> .	<input type="checkbox"/>
<input type="checkbox"/>	5% + More if Needed: (1) Five percent of principal per year, plus (2) unlimited <i>need-based</i> support.	<input type="checkbox"/>
<input type="checkbox"/>	5% Only Five percent of principal per year only. No additional principal regardless of need.	<input type="checkbox"/>
<input type="checkbox"/>	Need-Based Only Unlimited <i>need-based</i> support only.	<input type="checkbox"/>
<input type="checkbox"/>	No Rights to Principal: Income only.	<input type="checkbox"/>

(Please go on to the next page.)

MISCELLANEOUS INFORMATION.

Community property. If you have ever lived in one of the states listed below, or if you own real estate in one of these states, please circle the name of the state and indicate whether you have entered into any agreement about whether that property is separate property.

Arizona California Idaho Louisiana Nevada
 New Mexico Texas Washington Wisconsin
 Any Agreement? Yes No

Arizona California Idaho Louisiana Nevada
 New Mexico Texas Washington Wisconsin
 Any Agreement? Yes No

Other Matters. Describe or list here any facts or concerns that do not seem to be covered by the other sections of this questionnaire and that you believe may be relevant in connection with your estate plan.

PART II. INCOME AND ASSETS

SUMMARY TABLE

	HUSBAND	WIFE	JOINT
Monthly Social Security Income	\$	\$	
Monthly Retirement Income Other Than Social Security (IRA, 401(k), etc.)	\$	\$	
Monthly Investment & Other Income	\$	\$	
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
(Include Accidental Death Benefit)	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
ASSET TOTALS:	\$	\$	\$
	\$	\$	\$

Date Completed: _____

How Did You Hear About Our Firm: _____

Electronic Estate Planning Consultation

If you prefer to avoid the inconvenience of traffic jams, driving time, and the possible waiting time associated with a traditional face-to-face consultation, then you may want to consider an Electronic Estate Planning Consultation.

How It Works - 3 Simple Steps

Step 1 - Fill out the credit card authorization form below:

<input type="checkbox"/> I hereby authorize The Law Firm of Evan H. Farr, P.C. to charge the below credit card for the consultation fee for initial estate planning consultation. I understand that regular fees are \$300 per hour. I understand that the initial one hour consultation fee will be applied to the cost of document preparation if I purchase an estate planning package that includes the initial consultation fee.
<input type="checkbox"/> I hereby authorize The Law Firm of Evan H. Farr, P.C. to charge the below credit card in the amount of _____ for _____.
Name on Credit Card: _____
Type of Card: <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard
Credit Card Number: _____
Expiration Date: _____

Step 2 - Fax the completed intake form with this credit card authorization to us at 703-691-3061.

Step 3 - Within twenty-four hours (usually less) of receipt of your intake form, a staff member will review your intake form to make sure that the information on your form is complete. The staff member will then contact you via email to request additional information if needed. Then, a consultation will be arranged with the attorney, to be conducted either by phone or electronically via the Live Support feature on our Web site, whichever is your preference.