

Note: If you are not married, please fill out only information that is appropriate to you.

I. Personal Information

	SINGLE INDIVIDUAL or SPOUSE I	SPOUSE II
Legal name	_____	_____
Nickname	_____	_____
Legal residence	_____ _____	_____ _____
Home phone	_____	_____
Business phone	_____	_____
E-mail address	_____	_____
Occupation	_____	_____
Employer	_____	_____
Business address	_____ _____ _____	_____ _____ _____
Citizenship	_____	_____
Birth date	_____	_____
Place of birth	_____	_____
Social security number	_____	_____

Place and date of marriage _____

Any prenuptial agreement? Yes _____ No _____ (If yes, retain a copy of agreement.)

States resided in during marriage _____

Prior marriages (list name of spouse, date of marriage and place of marriage)	_____	_____
	_____	_____
	_____	_____

II. Family Information

Children's Name	Birthdate	Address	Spouse's Name
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Are any of these children from previous marriages? If so, list names.

Were any of these children adopted or born out of wedlock? If so, list names and identify whether the child is adopted or born out of wedlock.

Identify any child with special needs and describe those needs.

Other relatives (list parents, siblings, close blood relatives or any other dependents)

Name	Birthdate	Address	Relationship
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

III. Personal Advisors

Please list the name, affiliated organization's name, address and telephone number.

Physician _____

Clergyman _____

Insurance agent _____

Attorney _____

Trust officer _____

Accountant _____

Investment broker _____

Financial planner _____

Real estate advisor _____

Other _____

IV. Prior Estate Planning

A. Wills

SINGLE INDIVIDUAL
or SPOUSE I

SPOUSE II

Have you ever executed a will? _____

Date of execution _____

Who drafted will? _____

Name and address of the executors _____

Name and address of beneficiaries _____

Reason for change _____

B. Trusts

SINGLE INDIVIDUAL
or SPOUSE I

YOUR SPOUSE

Have you ever created a living trust agreement? _____

Are these trusts revocable? _____

Are these trusts irrevocable? _____

Are any of the trusts related to a pour-over provision in your will? _____

Names and addresses of the trustees _____

Names and addresses of the beneficiaries _____

Approximate value of trust _____

Continued >

Nature of properties included in the trust

Name and address of attorney drafting agreement

C. Other estate planning tools

SINGLE INDIVIDUAL
or SPOUSE I

SPOUSE II

Have you executed a power of attorney?

Who drafted the power of attorney?

Who did you designate to serve as your power of attorney?

When was the power of attorney executed?

Have you executed a health care proxy?

Who drafted the health care proxy?

Who did you designate to serve as your health care representative?

When did you execute a health care proxy?

Have you executed a living will?

When did you execute a living will?

Who drafted your living will?

D. Gifts

Have you and/or your spouse made any large gifts to anyone in any calendar year? _____

If yes, to whom and in what amounts?

For which gifts did you file a federal gift tax return? _____

V. Inventory of Accumulated Wealth

A. Bank accounts and certificates

Checking Accounts

Bank	Account Number	Names on Account	Average Balance
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Savings Accounts

Bank	Account Number	Names on Account	Average Balance
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Certificates of Deposit

Institution _____
Amount \$ _____
Maturity date _____
Owners _____

Institution _____
Amount \$ _____
Maturity date _____
Owners _____

Continued >

B. Real estate

Residential real estate

Location #1 _____
Description _____ Approximate value \$ _____
Mortgage \$ _____ Mortgagor _____
Names of owners _____

Location #2 _____
Description _____ Approximate value \$ _____
Mortgage \$ _____ Mortgagor _____
Names of owners _____

Non-residential real estate

Location of property #1 _____ Description _____
Approximate value \$ _____ Mortgagor _____ Mortgage \$ _____
Is property leased? _____ Name of lessee _____ Duration of lease _____
Annual rent \$ _____ Names of owners _____

Is ownership _____ tenancy-in-common _____ joint tenancy _____ community property

Location of property #2 _____ Description _____

Approximate value \$ _____ Mortgagor _____ Mortgage \$ _____
Is property leased? _____ Name of lessee _____ Duration of lease _____
Annual rent \$ _____ Names of owners _____

Is ownership _____ tenancy-in-common _____ joint tenancy _____ community property

C. Stocks and bonds

Stocks

Shares	Purchase Date	Cost	Value	Owners
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Special dividend arrangements are _____

Bonds

Denomination and type	Purchase date	Cost	Value	Owners
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Mutual Fund Shares

Shares/Type	Purchase date	Cost	Value	Owners
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

D. Life insurance policies

Policies on your and/or your spouse's life

Policy number _____
Is policy based on _____ your life _____ your spouse's _____ you and your spouse's life
Company _____
Principal amount \$ _____ Cash value \$ _____
Beneficiaries _____
Loans against the policy \$ _____
Location of policy _____

Policy number _____
Is policy based on _____ your life _____ your spouse's _____ you and your spouse's life
Company _____
Principal amount \$ _____ Cash value \$ _____
Beneficiaries _____
Loans against the policy \$ _____
Location of policy _____

Policies you own on the life of another

Policy number _____
Do _____ you own _____ your spouse owns _____ you and your spouse own the policy
Company _____
Principal amount \$ _____
Cash value \$ _____
Beneficiaries _____
Loans against the policy \$ _____
Location of the policy _____

Policy number _____
Do _____ you own _____ your spouse owns _____ you and your spouse own the policy
Company _____
Principal amount \$ _____
Cash value \$ _____
Beneficiaries _____
Loans against the policy \$ _____
Location of the policy _____

Continued >

E. Business Interests

Nature of business

Indicate any ownership interest you and your spouse may have in a business or profession (and denote if you or your spouse or both own the business)

Is the business ____ a proprietorship ____ a partnership ____ a corporation (specify if C or S)
____ a family limited partnership ____ a limited liability company?

If you or your spouse do not have sole interest, what is the percent of your ownership?

The other owners of the business or profession are:

Name	Age	Percentage of ownership
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Sale of the business after death

Is your estate committed to sell the business after your death? _____

Indicate the parties to this agreement _____

Date of agreement _____ Who is obligated to purchase? _____

What is the value of the business? _____

Your interest in it _____

F. Retirement plans

Account owner	Type of plan	Retirement benefit	Death benefit	Is Plan vested?	Balance
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

G. Tangible personal property

Do you maintain a list of your valuable possessions? _____ Where is the list located? _____

Indicate the major item(s) of value within each category:

Automobiles _____

Home furnishings _____

Jewelry _____

Antiques and art _____

Other tangibles _____

Other assets (describe) _____

VI. Liabilities

Name(s) on loan	Creditor	Due date	Terms of payment	Balance owed (as of today)
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____

VII. Disposition Of Estate

Please list any charitable organizations to which you or your spouse would like to leave a bequest?

Legal name of charitable organization	Address	Property or amount
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please list any specific property that you or your spouse would like to leave to a beneficiary.

Name of beneficiary	Date
_____	_____
_____	_____
_____	_____
_____	_____

Continued >

Who will receive the residue of your estate?

Name of beneficiary

Share

Whom do you wish to name as legal guardians of any minor children if you and your spouse die simultaneously or upon the surviving spouse's death?

Names: _____

Relationship: _____

Address: _____

Successor guardian choice:

Names: _____

Relationship: _____

Address: _____

Whom do you wish to name as the personal representative (executor) of your estate?

Names: _____

Address: _____

Successor personal representative:

Names: _____

Address: _____

Whom do you wish to have as power of attorney over your assets if you are incapacitated?

Names: _____

Address: _____

Successor power of attorney

Names: _____

Address: _____

Whom do you wish to name as your attorney-in-fact for healthcare, who can consent to medical treatment if you become incapacitated?

Names: _____

Address: _____

Successor healthcare power of attorney:

Names: _____

Address: _____

VIII. Location Of Key Documents

Birth certificate _____

Marriage certificate _____

Prenuptial agreement _____

Divorce papers _____

Naturalization (citizenship) papers _____

Passport _____

Employment records (including benefits) _____

Tax returns _____

Last will and testament (original) _____

Funeral/ burial instructions _____

Deeds to real estate _____

Stock certificates, bonds, mutual fund shares _____

Living will _____

Power of attorney _____

Health care power of attorney _____

Safety deposit box _____

Business buy-sell agreements _____

Spouse 1 Signature _____ DATE _____

Spouse 2 Signature _____ DATE _____

Estate Planning | DISCOVER THE PATH FactFinder

Note to the Agent: Gathering complete information for this factfinder will enable you, the agent, to analyze your clients' current situation and provide the most effective estate plan for them. Use the Estate Planning Agent Reference Guide for more information on estate planning. For assistance with technical questions as you put a proposal together, contact Advanced Markets at (800) 525-7133.

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