

William L. Hoge, III
& Associates
Law Offices

ESTATE PLANNING DATAPACK

Dear Prospective Client:

I understand that you are interested in having us prepare a Will for you. I generally refer Estate Planning matters to my associate, J. Daniel Landrum, who has many years of experience in simple and complex estate planning.

If you expect that your estate will simply involve residential real estate, passage of most of your estate from husband to wife (or vice versa), and distribution of some of the assets of the estate to any children you may have, with everything going to your children in the event both of you die, then our fee for preparation of such a Will would be nominal.

If your estate will involve establishing trust funds, life estates, fiduciary interests, business and/or investment concerns, etc., the estate will be more complicated and will require much more research and preparation. In complex situations such as this, our fees are commensurately higher.

By completing the attached questionnaire, you can provide us with the information we need to begin preparing your Will. Please be as complete and accurate as possible. If you need more space for any answers, please continue your response on the back of this form. All this information will, of course, be kept confidential.

After you have completed this Datapack, you need to contact our offices to set up an appointment with me or Dan Landrum. It would be helpful if you will fax, mail or hand-deliver your completed Datapack to us prior to the time of your first appointment. At your first appointment, we will discuss the fee that will be involved in handling your particular situation.

Thank you for allowing us this opportunity to be of service to you.

Very truly yours,



William L. Hoge, III

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Concentrating in Complex Family Law Representation
Dedicated to providing honest, caring, affordable, quality legal services

Education

University of Louisville
Bachelor of Science Degree (1969)
Juris Doctorate (1972)

Divorce Mediation Training with Zena Zumeta, J.D.
Mediator Certification (2002)

American Academy of Matrimonial Lawyers' Arbitration Training
Arbitrator Certification (2004)

Extensive Continuing Legal Education Awards and Teaching:

- Family Law
- Collaborative Family Law
- Alcohol and Drug Abuse
- Mediation Training
- Arbitration Training
- Domestic Violence
- Ethics
- Psychology
- Trial Technique & Demonstrative Evidence

Organizations

American Academy of Matrimonial Lawyers:
President, Kentucky Chapter (2003-2004)
Continuing Education Chair (1999-present)

Family Law Solutions, PLLC:
Founding Member

Kentucky Bar Association:
Lawyers Helping Lawyers Committee (1980)
Family Law Section Chair (1997-1998)
Child Protection & Domestic Violence Committee (2000-2003)

Kentucky Collaborative Family Law Network, Inc.:
Founding Member

International Academy of Collaborative Professionals:
Member

International Alliance of Holistic Lawyers:
Member

Louisville Bar Association:
Family Law Section Chair (1999)
Family Law Section Member
ADR Section Member

American Bar Association:
Commission on Lawyer Assistance Programs
Family Law Section Member

Jefferson County Family Court:
Family Support Center Advisory Committee
Family Court Advisory Committee (Divorce Rules Committee Chair)
Family Court Mediator Review Committee

Kentucky Academy of Trial Attorneys:
KATA Member
Family Law Editor for KATA *Advocate*

Special Recognition

Recipient of the LBA's 1999 Judge Richard A. Revell Family Law Practitioner of the Year Award
Kentucky Bar Association Continuing Legal Education Award (annually 1990-2003)

Publications and Public Speaking

Co-author and publisher of
Divorce in Kentucky – The Dissolution Resolution System, an Interactive Organizer and Video, 1997
Numerous Continuing Legal Education and motivational speaking engagements including ABA, AAML, KBA and LBA
Author, UK/CLE, *Kentucky Domestic Relations Practice*, 1st Ed., Chapter 14 (2006)

Legal Experience

Assistant Jefferson County Attorney (1972-1976)
Chief Prosecutor for Jefferson County Attorney (1976-1982)
General Counsel to International Union of Electrical Workers, Local 761 at General Electric (1975-1988)
General Counsel to Kentucky State District Council of Carpenters, AFL-CIO (UBCJA) (1988-1991)
General Private Legal Practice (1972 to Present)

Admitted and Practiced before:

Kentucky Supreme Court	1972	U.S. District Court, Eastern District of Ky.	1975
Sixth Circuit Court of Appeals	1974	U.S. Supreme Court	1975
U.S. District Court, Western District of Ky.	1973		

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ESTATE PLANNING DATA PACK

{Please Print}

If you are married and your spouse also wishes for us to prepare a will for him or her, please ask us for two copies of this form or simply photocopy an extra copy for your spouse before completing this questionnaire.

Today's Date: _____

YOUR FULL NAME: _____

PRESENT ADDRESS: _____

{City} {State} {Zip}

RESIDENT OF: State -- _____ County -- _____

YOUR DATE OF BIRTH: _____

HOME TELEPHONE: _____ BUSINESS TELEPHONE: _____

CELL TELEPHONE: _____ E-MAIL ADDRESS: _____

GENERAL ESTATE PLANNING INFORMATION

Have you ever had a Will prepared before? If so, please provide us with a photocopy of such Will.
No _____ Yes _____ (attach copy)

Are you married at the present time? _____

If so, your spouse's name? _____

How long have you been married? _____

Have you had any prior marriages? If so, please indicate how the prior marriage ended (divorce, death, etc.).

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YOUR CHILDREN

Please identify any of your living children (whether minors or adults and whether your natural children or adopted):

<u>Name of Child</u>	<u>Date of Birth</u>	<u>Present Age</u>	<u>Does Child Live With You?</u>

Please identify any of your children who are presently deceased (whether your natural children or adopted), indicating the child's age at death and whether that child had any natural or adopted children:

<u>Name of Child</u>	<u>Date of Birth</u>	<u>Age at Death</u>	<u>Does Child Have Any Heirs?</u>

SPECIFIC BEQUESTS

Do you wish to make any special bequests (gifts to any persons or organizations other than the "residue" of your estate)?¹ Instead of naming an alternate beneficiary, you have the option of having the gift revert to your residuary estate for distribution among your general beneficiaries.

SPECIAL BENEFICIARY	OVER 21?	ALTERNATE BENEFICIARY	OVER 21?	DESCRIPTION OF GIFT

(IF YOU NEED MORE SPACE FOR SPECIFIC BEQUESTS, PLEASE USE AN ADDITIONAL SHEET OF PAPER)

The **"residue"** of your estate or **"residuary estate"** is all of your real and personal property not otherwise disposed of by means of your estate. In other words, if your only "specific bequest" was \$1,000 left to a church or charity, everything else would be considered your "residuary estate". You might want to use a "specific bequest" to leave a favorite collectible to a certain person; the residue (or rest) of your estate would be divided according to the conditions for the disposition of your residuary estate found later in your Will.

RESIDUARY ESTATE

(Everything Not Disposed of by "Special Bequest")

The rest (or residue) of your estate will be distributed among your heirs in accordance with the wishes you express here. Traditionally, most simple estates pass from the deceased spouse to the surviving spouse and, in the event that the other spouse has already died, the residuary estate goes to the children and/or, if any of the children are deceased, that child's share goes to his or her offspring.

In such a case, if you were to die, the bulk of your estate would pass to your wife or husband. If your spouse died before you, the residue of the estate would go to your surviving children or your grandchildren (in the event any of your children die before you).

Please indicate below to whom you want to inherit the bulk of your estate (other than any Special Bequests indicated above).

RESIDUARY BENEFICIARY	OVER 21?	WHAT PERCENTAGE OF RESIDUARY ESTATE?

If any of the beneficiaries or alternate beneficiaries do not survive you, the bequest would customarily go to that person or organization's heirs or successors. Is that in accordance with your wishes?

In the unlikely event that NONE of the beneficiaries or alternate beneficiaries and none of their children survive you, to whom or to what organization do you want the residue of your estate to go?

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BEQUESTS TO MINORS

Are any of the beneficiaries to these bequests still minors (under 21)? _____

If so, you must decide how these gifts should go to these minors? You have two options:

- (1) The Uniform Transfer to Minors Act ("UMTA") permits you to name a "custodian" and an "alternate custodian" for these gifts, to hold and maintain these assets until the child reaches the age of 21. The UMTA is the generally preferred vehicle to transfer an asset to a child.

OR

- (2) Establishment of a trust, which would complicate the creation of your Will. Under a trust, you have the opportunity to direct that the asset be administered by a custodian until the child reaches what you determine to be an appropriate age for maturity to handle such an asset. Generally, a trust would only be established in a situation where the asset bequeathed to a child is truly substantial.

Do you want to use the UMTA to transfer any gifts to minors? _____

If so, please name a "Custodian". _____

Please name an "Alternate Custodian". _____

Do you want to incur the additional expense of establishing a more complicated Trust for the benefit of these minor children and for the administration of these assets? _____

If so, please name a "Custodian". _____

Please name an "Alternate Custodian". _____

At what age shall the assets be transferred to each child? _____

WE WILL REQUEST ADDITIONAL INFORMATION FROM YOU IF YOU
DECIDE TO DRAW UP TRUST DOCUMENTS FOR THE TRANSFER OF
ASSETS TO MINORS.

ADMINISTRATION OF YOUR ESTATE

Who would you like to appoint as your Personal Representative (also known as the "Executor", "Executrix" or "Administrator" of your estate)?

_____ Relationship to you: _____

In case that person is no longer living or for some other reason cannot serve as your Personal Representative, please name an Alternate Personal Representative.

_____ Relationship to you: _____

PAYMENT OF DEBTS OWED TO YOU

At the time of your death, certain individuals may owe you money (personal loans made by you, etc.). Please indicate here whether you wish to "forgive" any such debts.

If you do NOT wish to forgive such debts, please describe any such debts of which you are now aware:

NAME AND ADDRESS OF PERSON(S) OWING YOU MONEY	DATE DEBT WAS INCURRED	ORIGINAL AMOUNT OF AND REASON FOR DEBT

PAYMENT OF YOUR DEBTS AND DEBTS OF YOUR ESTATE

At the time of your death, you will no doubt have certain debts. In addition, by virtue of your death, your estate will incur certain other debts (funeral and burial expenses, etc.) You have at least two options for handling the payment of these debts.

These debts would customarily be paid from the residue of your estate, leaving the rest to be divided according to your directions among your residuary beneficiaries or their alternates.

Warning: In the case of an outstanding mortgage on your home or other large debt, the payment of such a debt from the residue of your estate would certainly diminish it greatly. In addition, your spouse or other beneficiary might be forced to sell your home in order to pay off the mortgage. We recommend the purchase of insurance which would pay off any substantial outstanding loans in the event of your death or the death of your spouse.

As an alternative, you can determine now to have your Personal Representative pay any bills from a particular asset, such as from your checking account or the sale of some asset, thus leaving the bulk of your estate intact for distribution to your heirs.

- Pay my debts prior to the distribution of my residuary estate to my beneficiaries.
OR
 Pay my debts and expenses from a particular asset (Identify: _____).
 _____).

How do you want your Personal Representative to handle the payment of estate and inheritance taxes?

- Pay estate and inheritance taxes from a designated asset (Identify: _____).
 Pay estate and inheritance taxes from my residuary estate.
 Pay estate and inheritance taxes from all of my property.

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HEALTH CARE DECISIONS

(Living Will and Durable Power of Attorney)

Do you want us to draw up a separate directive to your family and health care professionals explaining your preferences in the event you become so ill that you cannot direct your medical care? If you want to be able to communicate to your doctors your wishes in the event you become terminally ill or comatose, please complete the following.

If you are close to death from a terminal condition or in a permanent coma, the doctors will have several decisions to make, including administering life-prolonging procedures, including artificial respiration, resuscitation, dialysis, artificially-administered food and water and other are to make you comfortable or alleviate pain.

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If I have a **TERMINAL CONDITION** and can no longer direct my own health care:

- I do not want ANY life-prolonging procedures.
- I want ALL POSSIBLE life-prolonging procedures.
- I want SOME life-prolonging procedures, but only the following:
 - Blood and blood products
 - Cardio-pulmonary resuscitation (CPR)
 - Diagnostic tests
 - Dialysis
 - Drugs
 - Artificial respiration
 - Surgery

Comfort Care if in a TERMINAL CONDITION:

- I want food and water artificially administered.
- I DO NOT want food and water artificially administered.

- I want all pain reduction (pain drugs) and comfort care.
- I DO NOT want any pain reduction (pain drugs) and comfort care.

If I am diagnosed as being in a **PERMANENT COMA** and can no longer direct my own health care:

- I do not want ANY life-prolonging procedures.
- I want ALL POSSIBLE life-prolonging procedures.
- I want SOME life-prolonging procedures, but only the following:
 - Blood and blood products
 - Cardio-pulmonary resuscitation (CPR)
 - Diagnostic tests
 - Dialysis
 - Drugs
 - Artificial respiration
 - Surgery

Comfort Care if in a PERMANENT COMA:

- I want food and water artificially administered.
- I DO NOT want food and water artificially administered.

- I want all pain reduction (pain drugs) and comfort care.
- I DO NOT want any pain reduction (pain drugs) and comfort care.

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HEALTH CARE REPRESENTATIVE

Even if you sign a health care directive, some doctors may not be willing to abide by the decisions you have made. In that event, you should appoint someone you trust to express to the doctors the genuineness of your decisions and your desires.

NAME: _____

ADDRESS: _____

DAYTIME PHONE: _____

EVENING PHONE: _____

ALTERNATIVE HEALTH CARE REPRESENTATIVE

Please identify someone to serve as an ALTERNATE if your first choice for a Health Care Representative is not available

NAME: _____

ADDRESS: _____

DAYTIME PHONE: _____

EVENING PHONE: _____

We can use the information you have provided here to draft your Last Will and Testament, which you may then review and revise if necessary before executing the necessary documents.

F:\WP\FORMS\ESTATE PLANNING\Datapack.Estate Planning (6/29/06)

Please return completed Datapack to:

William L. Hoge, III
Suite 506, Legal Arts Building
200 South Seventh Street
Louisville, Kentucky 40202
Fax: (502) 583-1223
Phone: (502) 583-2005

If you have questions, please call Lois at (502) 583-2005, Ext. 104.

ATTORNEY'S NOTES

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