

PARKER, POLLARD, WILTON, & PEADEN, P.C.
PERSONAL DATA FORM

GENERAL INFORMATION

DATE _____

Name		Date of Birth	Age		
Address (Include city and state)		ZIP	County		
Home Phone		Fax			
Office Phone		E-Mail			
Cell Phone					
Employer		Annual Income \$			
Social Security:					
Spousal Information If Married					
Spouse		Date Of Birth		Age	
Employer		Office Phone			
		Cell Phone			
Social Security:		Annual Income \$			
Any previous marriage(s) Husband _____ Wife _____					
Have you signed any prenuptial or postnuptial agreements? Husband <input type="checkbox"/> Wife <input type="checkbox"/>					
Children-Name(s) & Address	Date of Birth	Married	Number of Children	Telephone Number	Prior Marriage
Other Beneficiaries:					

I was referred to Parker, Pollard, Wilton & Peaden by: _____

Is either spouse receiving benefits from a trust or an estate? _____

List the amount of any inheritance you expect to receive: \$ _____

Advisors:	Name	Address	Phone
Accountant			
Life Insurance Agent			
Trust Officer			
Stock Broker			
Investment Advisor			

Location of safety deposit box: _

Miscellaneous Problems (*Burial Instructions, prior gifts, prior will, etc.*)_

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Has client lived in community property state? (*Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas, and Washington*)

Yes or No

U.S. Citizens: Yes No

Have you ever filed a gift tax return? Yes No

Have you ever made any gifts over \$13,000? Yes No

Please complete the Financial Data Form to the best of your ability. If you are uncertain about the correct amount for any account, you can discuss them with the attorney that meets with you.

FINANCIAL DATA FORM
(Round off to nearest thousand)

ASSETS		HUSBAND	WIFE	JOINT OR SINGLE	
1. Real Estate (List Address)					
2. Checking					
3. Savings					
4. Stocks					
5. Bonds					
6. Employee Benefits					
7. Individual Retirement Account (IRA)					
8. Business Interests					
9. Household Effects, Jewelry, Furniture, Antiques					
10. Life Insurance Face Value					
11. Automobiles and other assets					
TOTALS					
LIABILITIES					
1. Mortgages					
2. Notes to Banks					
3. Loans to Insurance					
4. Accounts Payable					
5. Others					
TOTALS					
STOCKS					
INSURANCE COMPANIES	KIND	POLICY	OWNER	BENEFICIARY	AMOUNT

ASSETS

Husband _____

Wife _____

Joint _____

Total Assets _____

Total Liabilities _____

Net _____

LIABILITIES

Husband _____

Wife _____

Joint _____

Use page 5 to list additional data.

EXAMPLE OF CORRECTLY PREPARED
FINANCIAL DATA FORM
(Round off to nearest thousand)

ASSETS	HUSBAND	WIFE	JOINT OR SINGLE		
1. Real Estate 1010 Floyd Avenue 1039 Joppa Place	\$80,000 \$140,000				
2. Checking BB&T Central Virginia Bank Bank of America	2,000	\$1,000	\$3,000		
3. Savings Bank of America BB&T	5,000 10,000	8,000 2,000	10,000 1,000		
4. Stocks	1,000	10,000	30,000		
5. Bonds <i>Series E U.S. Bonds</i>		2,000			
6. Employee Benefits					
7. Individual Retirement Account (IRA)					
8. Business Interests					
9. Household Effects, Jewelry, Furniture, Antiques	10,000				
10. Life Insurance Face Value	60,000	10,000			
11. Automobiles and other assets					
TOTALS	\$308,000	\$33,000	\$44,000.00		
LIABILITIES					
1. Mortgages <i>BB&T</i>	\$40,000				
2. Notes to Banks <i>Bank of America</i>		\$5,000			
3. Loans to Insurance <i>Prudential</i>		5,000			
4. Accounts Payable	5,000				
5. Others					
TOTALS	\$45,000	\$10,000			
STOCKS					
<i>General Business Co., 30 shares @ \$10</i>	\$300				
<i>ABC Corp., 100 shares @ \$100</i>		\$10,000			
<i>Computers, Inc., 200 shares @ \$150</i>			\$30,000		
INSURANCE COMPANIES	KIND	POLICY	OWNER	BENEFICIARY	AMOUNT
<i>Prudential Ins. Co.</i>	<i>Ordinary Life</i>	<i>XS5007832</i>	<i>Mr. Doe</i>	<i>Mrs. Doe</i>	\$10,000
<i>Life of Virginia</i>	<i>Group Term</i>		<i>Mr. Doe</i>	<i>Mrs. Doe</i>	50,000
<i>Mutual Life</i>	<i>Term</i>	<i>ART1468321</i>	<i>Mrs. Doe</i>	<i>Mr. Doe</i>	10,000

OTHER SUPPLEMENTAL INFORMATION AND NOTES

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