The Law Office of Michael J. Howell, P.A.

Economy Plan Package for
Single Client

Our Economy Plan includes a Simple Will, a Durable General Power of Attorney, and a Health Care Power of Attorney for a base price of $475.

INSTRUCTIONS

Information to be Completed and Mailed to Our Office with a Check for $475 along with Our Economy Plan Article. All pages with signatures should be signed and dated.

Client Information Sheet. Please complete the information, sign, and return a copy to us. Email is preferred. Keep the original for your file.

Asset Summary Sheet. Please complete the information, sign, and return a copy to us. Email is preferred. Keep the original for your file.

Simple Will Data Sheet. Please complete the information, sign, and return a copy to us. Keep the original for your file.

THE LAW OFFICE OF

MICHAEL J. HOWELL, P.A.
112 Executive Center
1 Corpus Christi Place, #112
Hilton Head Island, SC 29928

HiltonHeadEstatePlanning.com

Michael J. Howell
Licensed in Florida and South Carolina
Certified by the South Carolina
Supreme Court as a Specialist
In Estate Planning and Probate Law

Certified Mediator in South Carolina
Probate and Circuit Courts

Margaret H. Up De Graff
Licensed in
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Certified Mediator in South Carolina Probate
and Circuit Courts

CLIENT INFORMATION SHEET and **AGREEMENT TO PAY LEGAL FEES OF NO LESS THAN $475 PER OUR ECONOMY PLAN**
(Single United States Citizen)

FULL NAME: ____
STREET ADDRESS OR POST OFFICE: ____
CITY, STATE, ZIP CODE: ____
HOME TELEPHONE NUMBER: ____
OFFICE/CELL TELEPHONE NUMBER: ____
TEXT MESSAGE NUMBER, IF APPLICABLE ____
EMAIL ADDRESS: ____
CITIZENSHIP (if not United States): ____
DATE OF BIRTH: ____

Names and Dates of Birth of Children:
____ ______________________
____ ______________________
____ ______________________

Please list other names, if any, that you, your children and/or any of your beneficiaries have been known by:

Have you or any of your beneficiaries ever participated in Artificial Reproductive Technology? __________
Is there anyone who might challenge your estate planning? __________ If yes, who? __________________________.

NATURE OF THE WORK NEEDED IS A FOLLOWS:

Simple Will

Durable General Power of Attorney

Health Care Power of Attorney.

How did you find out about us? ____

IF YOU FOUND US OR OUR TELEPHONE NUMBER ON A WEBSITE, WHICH ONE? AVVO ____, HG ____, Probate.com ______. LII ____. Justia _____Cornell.edu ____, Lawyer.com, Our Website _____ Other (Please List):____

__________________________________ ______________________, 20________
SIGNATURE DATE

Rev. 09/19

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ASSET SUMMARY SHEET FOR OUR ECONOMY PLAN

(Single United States Citizen)

____
Name of Client

DESCRIPTION OF ASSETS	**VALUE OF ASSETS *NOT OWNED* AS JOINT TENANTS WITH RIGHT OF SURVIVORSHIP**	**VALUE OF ASSETS *OWNED AS* JOINT TENANTS WITH RIGHT OF SURVIVORSHIP**
Real Estate		
Stocks & Bonds		
Checking Accounts		
Savings & CDs		
Notes & Receivables		
Life Insurance		
Pensions/IRAs		
Annuities		
Other Property		
Less Debts		
TOTALS		

If an asset is owned in any form of co-ownership, please let us know which asset it is, in the box for joint tenants with right of survivorship, and how many co-owners there are. For property in a Revocable Trust, please place “RT” beside it. If property is in an Irrevocable Trust, please place “IT” beside it. If you own assets in TOD or POD form, please so note them.

Are any closely held business interests owned by you?___________. Are they listed above? ________

This information will be used in planning your estate. If the information is not correct, the advice which you are given may not be correct and may create unexpected and adverse estate planning and tax consequences. Please sign below as your acknowledgment that the information is substantially correct and that we may rely upon its validity in advising you.

You may also provide additional financial information if you choose to do so, but please completely fill out this Asset Summary Sheet. It is a form of matrix and is designed to quickly spot a number of issues and reduce the time that it takes to review your estate plan.

________________________________   _____________________, 20________
SIGNATURE   DATE

THE LAW OFFICE OF
MICHAEL J. HOWELL, P.A.
A TRUSTS AND ESTATES LAW FIRM

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SIMPLE WILL DATA SHEET FOR OUR ECONOMY PLAN

(Single United States Citizen)
(To Be Filled Out by *New or Prospective Clients* Only)

--I do not have total assets (joint and/or separate) over $1,000,000, including stocks, bonds, notes, mortgages, cash, life insurance, expected inheritances, real estate, partnerships, business interests, retirement benefits and plans, annuities, tangible personal property, and/or other assets; nor have I made any significant non–charitable gifts (i.e. over $10,000-$15,000, depending upon year of the gift) to any one individual or entity. **[Please submit a list of assets using the enclosed Asset Summary Sheet, showing values and ownership as between yourself and anyone else as joint with right of survivorship.]**

--I want to leave all assets to my children, equally, and if a child predeceases, then that child's share will go to his and/or her surviving children, equally.

--I want the executor to be one of my children and/or a corporate fiduciary. **[Please list who will serve as executor(s) and substitute or successor executor(s), at the bottom of this page, in the order each will serve.]**

--All children are from one marriage and none of them are handicapped. If there was a previous marriage which ended in a divorce, there is no alimony or other obligations as a result of the previous marriage(s).

--I am not "living with anyone" that others may reasonably believe I am married to.

--I am confident that I will not need any help managing my assets even if I am disabled or in a nursing home.

--I am not concerned about avoiding probate when I die.

<u>NOTE: If any of the above pre-printed statements are not true, a simple Will may not be appropriate. If you answered no to any questions, please let us know</u>.

ADDITIONAL COMMENTS AND QUESTIONS

____

____

______________________________ ____________________, 20________
SIGNATURE DATE

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