HART, MIERAS & MORRIS, INC., Attorneys at Law

					hmmlegal.					
Legal Name (I.D).) – Clien	t #1	Male/Fema	ale	Legal N	ame (I.D.) – <i>Cli</i>	ient #2	Male	e/Female
Preferred Name	for Docu	ments	(if different)		Preferr	ed Na	me for Do	ocs (if d	ifferent)	
(For new trusts or	nly.)				(For new	trusts	only.)			
Citizensh	ip	I	Date of Birth			Citize	nship		Da	te of Birth
Marital Status (circle one)	Marrie		Registered Dom. Pship	Sep	arated	Div	vorced		ever rried	Widow(er)
Date of:										
			Ro		State:	Zip:		County		
Street		N	Nailing Addre	ss: (if	different	from F	Residence	2)		
City				:	State	Zip		County		
Phone: Home	()				E-ma client					
Work or cell?	()				client	#2				
Work or cell?	()									

FAMILY INFO

All children from <u>current</u> marriage: (oldest to youngest) – even if child is to receive nothing.					
	M/F	Age	Married? Y/N	# of kids	Attorney notes:
	M/F		Y/N		
	M/F		Y/N		
	M/F		Y/N		
	M/F		Y/N		
Deceased child(ren):	Name of	fchildrer	of deceased	d child :	

All children from <u>Client 1's</u> prior relationship(s): (oldest first) – even if child is to receive nothing.					
	M/F	Age	Married? Y/N	# of kids	Attorney notes:
	M/F		Y/N		
	M/F		Y/N		
	M/F		Y/N		
	M/F		Y/N		
Deceased child(ren):	Name of	children	of deceased	child:	

All children from <u>Client 2's</u> prior relationship(s): (oldest first) – even if child is to receive nothing.					
	M/F	Age	Married? Y/N	# of kids	Attorney notes:
	M/F		Y/N		
	M/F		Y/N		
	M/F		Y/N		
	M/F		Y/N		
Deceased child(ren):	Name of	children	of deceased	child :	

Names of anyone being disinherited:		

Real Estate Information

Please make sure you have sent us this form and a copy of your most recent property tax bill [2020, if possible] for each property before your meeting, and have these documents available with you at the meeting (i.e., in an electronic format for a Zoom or phone meeting), in case we need another copy.

Real Estate Information Address (And) Assessor's Parcel Number ("APN")	member live there? Their name?	Single Family Residence ("SFR")? Multi Unit; # of units? Commercial? Other: please describe?	- Cost Basis (purchase price)? - Current Market Value? - Mortgage Balance?	Assessed Value (See property tax bill)	Income Annually on this property ?	What % do you own, and names of other owners?
Address:			-			
			-			
APN:			- -			
Address:			-			
			- -			
APN:			-			
Address:			_			
APN:			-			
Address:			-			
APN:			- -			
Address:			-			
APN:			- -			
Address:			-			
APN:			-			
Address:			-			
APN:			- -			
Address:			-			
APN:			-			

Real Estate Information (continued, if needed)

Real Estate Information Address (And) Assessor's Parcel Number ("APN")	member live there? Their	Single Family Residence ("SFR")? Multi Unit; # of units? Commercial? Other: please describe?	- Cost Basis (purchase price)? - Current Market Value? - Mortgage Balance?	Assessed Value (See property tax bill)	Income Annually on this property ?	What % do you own, and names of other owners?
Address:			-			
APN:			_			
Address:			-			
APN:						
Address:			-			
APN:			_ -			
Address:			-			
APN:			-			
Address:			-			
APN:			-			
Address:			-			
APN:			-			
Address:			_			
APN:						
Address:			-			
APN:						

What is the <u>estimated</u> current <u>gross value</u> of your assets (i.e., without adjustment for loans, mortgages, etc.)?

ASSETS	Held Jointly	Client #1	Client #2
Real Estate	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
Bank Accounts	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
Investment/Brokerage	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
IRA's, 401(k), 403(b)	\$	\$	\$
	\$	\$	\$
Annuities	\$	\$	\$
	\$	\$	\$
Life Insurance	\$	\$	\$
	\$	\$	\$
Businesses (LLC, S-Corp, C-Corp, Partnership, DBA, etc.)	\$	\$	\$
	\$	\$	\$
Other (art, RV, jewelry, Promissory Notes, intellectual property, etc.)	\$	\$	\$
TOTALS:	\$	\$	\$

How were you referred to our office?	
Friend/relative:	
Seminar:	
Web search:	
Mail/advertisement:	
Other:	

Please read and sign prior to appointment:

Waiver of Conflict (for couples only)

Each spouse or partner has the right to independent counsel. Where two persons consult an attorney regarding their assets, there is a potential conflict of interest. For example, a conflict may arise regarding separate property and community property issues.

Therefore in light of the foregoing, I have been advised that I have the right to seek independent advice from a separate attorney. I choose not to do so and have agreed to meet with *Hart, Mieras & Morris, Inc.* ("Hart") jointly with my spouse/registered domestic partner.

Initials:		
	(Client #1)	(Client #2)
For al	l clients	
I give my permission for Hart to use and rely on document drafting and services as requested. competently depends on my providing complete family circumstances.	I am aware that	Hart's ability to represent me
Initials:		
	(Client #1)	(Client #2)
Release of Informa	ation (for all client	s)
Hart has joined with several professionals to proservices all through one office. This allows for a financial professional needs, and helps to simple when they have to take over your legal and financial professional needs.	a coordinated effo	ort to meet all of your legal and a avoid confusion for your heirs
I hereby authorize the release of my personation of the financial professionals to meet my legal and/or f		<u> </u>
Initials:		
	(Client #1)	(Client #2)

Email to contact@hmmlegal. Make sure you use your first and last name in the body or subject of the email for identification purposes. Thank you.