



WITH INSIGHT & COMPASSION
AMY DOW
Law

6501 Congress Ave., Suite 100
Boca Raton, FL 33487
Phone (561) 288-1750
amyd@amydowlaw.com
www.AmyDowLaw.com

INTAKE QUESTIONNAIRE

INSTRUCTIONS: You can complete this form by typing in the boxes. Once complete, save it to your computer/device and then email it to us at amyd@amydowlaw.com. If you prefer, you can print it, fill it in by hand and then either scan it for email or send it regular mail.

PERSONAL INFORMATION

Full Name: _____ Maiden Name (if applicable): _____

Address: _____

Mobile Phone: _____ Home Phone: _____

E-mail: _____ Date of Birth: _____

Social Security Number: _____ Are you a US Citizen: ☐ Yes ☐ No

Are you a Veteran: ☐ Yes ☐ No If yes, service dates? _____

Are you: ☐ Single ☐ Married ☐ Widowed ☐ Divorced ☐ Other _____

Do you own your home? ☐ Yes ☐ No

Do you have any minor children or adult disabled children? ☐ Yes ☐ No

Do you have long term care insurance? ☐ Yes ☐ No

Do you have: ☐ Will ☐ Trust ☐ Power of Attorney ☐ Living Will ☐ Health Care Surrogate

Are you able to sign your name? ☐ Yes ☐ No

SPOUSE/PARTNER PERSONAL INFORMATION IF APPLICABLE

Full Name: _____ Maiden Name (if applicable): _____

Mobile Phone: _____ Home Phone: _____

E-mail: _____ Date of Birth: _____

Social Security Number: _____ Are you a US Citizen: ☐ Yes ☐ NoAre you a Veteran: ☐ Yes ☐ No If yes, service dates? _____Do you have any minor children or adult disabled children? ☐ Yes ☐ NoDo you have long term care insurance? ☐ Yes ☐ NoDo you have: ☐ Will ☐ Trust ☐ Power of Attorney ☐ Living Will ☐ Health Care SurrogateAre you able to sign your name? ☐ Yes ☐ No

Address if different from spouse/partner:

FAMILY/IMPORTANT PEOPLE

When we discuss your estate planning, we will discuss people you would like to appoint to important roles such as your power of attorney, health care surrogate, trustee, personal representative, guardian, etc. We will also discuss who you will name as your beneficiaries.

Please list the names of your children.

NOTE: if you are currently married, please indicate if the child is from a different parent.

Child's Name	Age	Is this child disabled?	If applicable, please note if child is from another parent.

AMY DOW LAW

6501 Congress Avenue, Suite 100 • Boca Raton FL 33487
 561-288-1750 • www.AmyDowLaw.com • amyd@amydowlaw.com

Please list those people who are important to you and who you may name in your documents:

1. Name: _____

This person is: ☐ Your Child ☐ Close Friend ☐ Partner
☐ Relative _____ (e.g., sister, niece, brother-in-law, etc.)

Address: _____

Mobile Phone: _____ Home Phone: _____

E-mail: _____ Date of Birth (if your child): _____

2. Name: _____

This person is: ☐ Your Child ☐ Close Friend ☐ Partner
☐ Relative _____ (e.g., sister, niece, brother-in-law, etc.)

Address: _____

Mobile Phone: _____ Home Phone: _____

E-mail: _____ Date of Birth (if your child): _____

3. Name: _____

This person is: ☐ Your Child ☐ Close Friend ☐ Partner
☐ Relative _____ (e.g., sister, niece, brother-in-law, etc.)

Address: _____

Mobile Phone: _____ Home Phone: _____

E-mail: _____ Date of Birth (if your child): _____

AMY DOW LAW

6501 Congress Avenue, Suite 100 • Boca Raton FL 33487
 561-288-1750 • www.AmyDowLaw.com • amyd@amydowlaw.com

4. Name: _____

This person is: ☐ Your Child ☐ Close Friend ☐ Partner
☐ Relative _____ (e.g., sister, niece, brother-in-law, etc.)

Address: _____

Mobile Phone: _____ Home Phone: _____

E-mail: _____ Date of Birth (if your child): _____

5. Name: _____

This person is: ☐ Your Child ☐ Close Friend ☐ Partner
☐ Relative _____ (e.g., sister, niece, brother-in-law, etc.)

Address: _____

Mobile Phone: _____ Home Phone: _____

E-mail: _____ Date of Birth (if your child): _____

Grandchildren (if not named above):

1. Name: _____ Parents: _____

2. Name: _____ Parents: _____

3. Name: _____ Parents: _____

4. Name: _____ Parents: _____

5. Name: _____ Parents: _____

AMY DOW LAW

6501 Congress Avenue, Suite 100 • Boca Raton FL 33487
 561-288-1750 • www.AmyDowLaw.com • amyd@amydowlaw.com

FINANCIAL INFORMATION

A. MONTHLY INCOME (approximate, gross)

SOURCE	YOU	PARTNER/SPOUSE
Pensions	\$ 0.00	\$ 0.00
Social Security	\$ 0.00	\$ 0.00
Interest/Dividends	\$ 0.00	\$ 0.00
VA Payments	\$ 0.00	\$ 0.00
Annuity Payments	\$ 0.00	\$ 0.00
Rental Income	\$ 0.00	\$ 0.00
Other	\$ 0.00	\$ 0.00
Other	\$ 0.00	\$ 0.00
Totals	\$ 0.00	\$ 0.00

B. ASSETS (approximate)

SOURCE	YOU	PARTNER/SPOUSE	JOINTLY OWNED
Cash (savings, checking)	\$ 0.00	\$ 0.00	\$ 0.00
Investment accounts	\$ 0.00	\$ 0.00	\$ 0.00
Home (est. value)	\$ 0.00	\$ 0.00	\$ 0.00
Other real estate	\$ 0.00	\$ 0.00	\$ 0.00
Retirement accounts	\$ 0.00	\$ 0.00	\$ 0.00
Insurance cash value	\$ 0.00	\$ 0.00	\$ 0.00
Other	\$ 0.00	\$ 0.00	\$ 0.00
Other	\$ 0.00	\$ 0.00	\$ 0.00
Totals	\$ 0.00	\$ 0.00	\$ 0.00

AMY DOW LAW

6501 Congress Avenue, Suite 100 • Boca Raton FL 33487
 561-288-1750 • www.AmyDowLaw.com • amyd@amydowlaw.com

C. BUSINESS INTERESTS

Please provide a short description of any business interests you may have, giving the name, location, percentage owned, names and relationship of co-owners, and the form of ownership (i.e., sole proprietorship, closely held corporation, partnership, etc.).

ADDITIONAL/MISC

Who referred you to Amy Dow Law? _____

Gifting History:

Have you made any significant gifts (more than \$1,000) of money or property in the last five years? ☐ Yes ☐ No

If yes, please provide approximate date, amount and to whom.

Additional Notes – Please add anything else you think may be important:

—

AMY DOW LAW

6501 Congress Avenue, Suite 100 • Boca Raton FL 33487
561-288-1750 • www.AmyDowLaw.com • amyd@amydowlaw.com