

FABIAN LAW FIRM

Cumming Office:
101 Pilgrim Village Drive
Suite 200
Cumming, GA 30040

Buckhead Office:
3630 Peachtree Road, NE
Suite 1025 – 10th Floor
Atlanta, GA 30326

Tel. 678-513-1112
Fax 678-513-2938

cfabian@fabian-law-firm.com

Client Information Sheet - WILLS

Name: _____ Age: _____

Occupation: _____

Address: _____

City, State, Zip: _____

County: _____

Last four digits of SS# _____

Legal Plan Case Number (if applicable): _____

Referred By: _____

Do you have prior Wills: _____

Contact Info.:

Cell - _____

Home - _____

Work - _____

Email - _____

Marital Status: _____

Spouse (if applicable): _____ Age: _____

Occupation: _____

Children (if applicable)/Ages:

1. _____

2. _____

3. _____

4. _____

Executor: _____
Address: _____
Phone: _____

Alternate Executor: _____
Address: _____
Phone: _____

Trustee (if applicable): _____
Address: _____
Phone: _____

Alternate Trustee: _____
Address: _____
Phone: _____

(If applicable) Guardian for minor (under 18) children:

Address: _____
Phone: _____

Alternate Guardian: _____
Address: _____
Phone: _____

Real Estate located in GA:

1. _____
2. _____
3. _____

Real Estate located outside the state of GA:

1. _____
2. _____
3. _____

Any assets located outside of the United States? _____

Approximate net asset value (not including life insurance): _____

Life Insurance Policies/Value:

1. _____
2. _____
3. _____

Person you want to designate to be your Financial Power of Attorney:

Primary: _____

Alternate: _____

Person you want to designate to be your Health Care Agent:

Primary: _____

Alternate: _____