**Client Name:**

|  |
| --- |
| **ALL INFORMATION IS STRICTLY CONFIDENTIAL** |
| MAILING/BILLING ADDRESS  |
| Street Address / P.O. Box: |
| **City:** | **State:** |
| **Zip:** | **County:** |
|  |
| YOUR PERSONAL INFORMATION  |
| Full Legal Name: |
| **[ ]  M [ ]  F** | **Date of Birth:** | **REQUIRED [ ] Yes I am a US Citizen or Resident Alient (Green Card):** |
| **Home Phone:** | **Cell Phone:** |
| **E-mail:** |
| **Marital status** [ ]  Single [ ]  Married [ ]  Separated [ ]  Divorced [ ]  Widowed |  |
|  |

|  |
| --- |
|  |
| SPOUSE/DOMESTIC PARTNER INFORMATION  |
| Full Legal Name: |
| **[ ]  M [ ]  F** | **Date of Birth:** | **REQUIRED [ ] Yes I am a US Citizen or Resident Alient (Green Card):** |
| **Home Phone:** | **Cell Phone:** |
| **E-mail:** |
|  | **REQUIRED - Date of Marriage/Domestic:** |

**[ ] (CHECK IF APPLIES) I/WE own and use firearms in more than one state.**

**PROVIDE NAMES AND BIRTHDATES OF CHILDREN OR PUT “NONE”**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CIRCLE ONE IF APPLIES: A SPOUSE OR THIS PERSON: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ has access to my firearms.**

[ ] Person circled above regularly uses my firearms, has access to them, and/or we own a number together.

**OR** [ ] Person circled above merely has access to my stored firearms.

**OR** [ ] Person circled above has no access or independent use of my firearms.

**SUCCESSOR TRUSTEE INFORMATION**

**In the event of your death or incapacitation, who would you want to take over managing your trust assets?**

1. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; then**
2. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; then**
3. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; then**

**DISTRIBUTIONS AT DEATH**

**#1: SPECIFIC GIFTS OF ONE OR MORE FIREARMS – Do you want to give away specific gun(s) to specific individual(s)?**

**Recipient Property**

**#2: [\_\_\_] MARRIED ONLY – CHECK HERE TO PROVIDE FIRST FOR SPOUSE**

[\_\_\_] All to spouse.

**OR** [\_\_\_] \_\_\_\_\_% to spouse in trust, remainder under #3 below.

**#3: PLANNING FOR OTHERS – Who do you want to receive your gun(s) when you die?**

**PERCENTAGE TO INDIVIDUALS/CLASSES (example – To Bill or to “my living nieces”)**

**Name / Relationship Insert “D” or “B”\* Share**

 %

 %

 %

 **MUST TOTAL 100%**

**#4: REMOTE CONTINGENT BENEFICIARIES -**

[\_\_\_] Heirs at Law

**OR** [\_\_\_] Charity - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_