**PERSONAL AND Contact Information**

**Please enter names exactly as you want them to appear in your estate plan**

**Your Information**

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| **Name:** |  |
| **DOB:** |  |
| **Home Ph:** |  |
| **Cell:** |  |
| **Email:** |  |
| **Home Address:** |  |
| **Mailing Address:** |  |

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| **Mailing Address:** |  |

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| **Date of Marriage or Domestic Partnership** |  |

**Persons Involved with Your Estate Plan**

(Please include any persons that will be involved in your estate plan, for example: family, friends, beneficiaries, financial agents, healthcare agents, etc.)

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| **Name:** |  |
| **Relationship to You:** |  |
| **DOB (children only):** |  |
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| **Relationship to You:** |  |
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| **Email:** |  |
| **Home Address:** |  |

**Professional Contacts**

(For example: attorney, financial advisor, insurance broker, tax preparer, physicians, pet sitters, clergy, etc.)

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| --- | --- |
| **Name:** | Kathy Cleere |
| **Company:** | Cleere Law Offices, P.C. |
| **Professional Contact Type:** | Estate Planning Attorney |
| **Phone:** | 520-219-9733  |
| **Email:** | Kathy@CleereLaw.net |
| **Address:** | 10445 N Oracle Rd, Suite 141, Oro Valley, AZ 85737 |

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| **Name:** |  |
| **Company:** |  |
| **Business Contact Type:** |  |
| **Phone:** |  |
| **Email:** |  |
| **Address:** |  |

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| **Name:** |  |
| **Company:** |  |
| **Professional Contact Type:** |  |
| **Phone:** |  |
| **Email:** |  |
| **Address:** |  |

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| **Company:** |  |
| **Professional Contact Type:** |  |
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| **Company:** |  |
| **Professional Contact Type:** |  |
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| **Name:** |  |
| **Company:** |  |
| **Professional Contact Type:** |  |
| **Phone:** |  |
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| **Address:** |  |