

Your Name: _

How did you hear about us?								
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 Alien (Green Card)				
Occupation:			Employer:					
Home Phone:			Cell Phone:					
E-mail:								
Marital status: ☐ Single	☐ Married ☐ Se	eparated 🗆	Divorced 🗆	Widowed				
SPOUSE/DOMESTIC PARTNER INFORMATION								
Full Legal Name:								
□ M □ F	Date of Birth:		REQUIRED Resident A	D: YES I am a US Citizen or Alien (Green Card)				
Occupation: Employe		Employer:						
Home Phone:	Cell Phone:							
E-mail:								
REQUIRED – Date of Marriage/Domestic Prtshp:			nestic Prtshp:					

PAYMENT INFORMATION

Paym	ent method: [] VISA, [] Mastercard, [] AmEx, or [] Discover, or [] Check.	•
NAM	E ON CARD:	
	NG STREET ADDRESS:	
BILLIN	NG CITY, STATE, ZIP:	
CARD	NUMBER:	
CARD	EXPIRATION DATE:	
CVV (CODE (3 digit code on back):	
**Yc	ou may also pay at www.gtaglaw.com by clicking on the Pay Online tab.	**
firearr	TRUST INFORMATION nique trust is an attorney-prepared trust provided to our clients to assist in planning for certain ns and related items. This trust design intentionally provides only a limited number of customizati p the cost down. We can discuss customization once you've mailed/emailed us the form.	ions
PROI	POSED NAME OF TRUST: TRUST	ST
	Using your full name or last name visibly ties you to the tr Many clients add words such as Gun, Firearm(s), or Armor the title, eg. John Smith Gun Trust.	
DATE	E TO BE SIGNED: (if known)	
TRUS	ST DESIGN (Check one):	
	[] Creation of New Trust	
OR	[] Restatement of Existing Trust	
	Original Trust NAME:	_
	Original Trust Date:	
	Grantor:	
	Original Trustee:	
	Current Trustee:	

FAMILY INFORMATION: [] I am not now married. OR [] I am married, and my spouse's name is reference in this agreement to "my spouse" is a reference to him or her. AND My spouse is a U.S. Citizen OR My spouse is NOT U.S. Citizen Provide the names and birth dates of your children/stepchildren below or put "None": Name **Birth Date** IMPORTANT: Mere access to your firearms is the same as actual possession, so discuss the following issue with us if it applies in your situation. Check either "spouse" or "person" if the following statement applies: My [] spouse or the following named [] person ______ has access to my firearms. [] The spouse or person checked above regularly uses my firearms, has access to the,

and/or we own a number together.
 OR [] The spouse or person checked above merely has access to my stored firearms.
 OR [] The spouse or person checked above has no access or independent use of my firearms.

SUCCESSOR TRUSTEE INFORMATION:

		t of your death or incapacity, who would you want to take over managing your (in order of preference)?						
	1.	; then						
	2.	; then						
	3.	; then						
	4.	You may provide more names if you wish; additional successors will be appointed by reference to your other estate planning documents, or if not, by your State law.						
DISTRIB	DISTRIBUTIONS AT DEATH:							
	#1: Specific gifts of one or more firearms							
	We provide a blank "tangible personal property memorandum" for you to complete and update at any time. With it you may identify specific firearms or accessories owned by this trust that your Trustee would distribute to named individuals at your death.							
	#2:	For married persons only—check here to provide for your spouse first						
		[] Check ONLY if you want your trust to continue for your spouse (but <u>not</u> if you simply wish to give him/her your firearms outright, i.e. personally)						
		Next select one of the following:						
		[] All to spouse.						
		OR						

#3: Remainder will pass by percentage share

_____ % to spouse, remainder under #3 below.

Please complete the Remainder Beneficiary Worksheet on the following page to distribute any remaining assets by percentage.

REMAINDER BENEFICIARY WORKSHEET

Remainder beneficiaries receive all assets that are left over after satisfaction of specific gifts.

	Name/Relationship	Insert "D" or "B"*	Share
1			%
2			%
3			%
4			%
			%
			%
			%
8			%
9			%
10			%
TOTAL			100%

^{* &}quot;D" means "or to descendants" while "B" means "or to other named beneficiaries."

#4: Remote contingent beneficiaries

If no beneficiaries remain, then your main estate plan or state law will control. If you wish to change this please contact our office to discuss a reasonable fee to customize your trust.

REQUIRED EXHIBITS & SCHEDULES:

We provide certain Exhibits and Schedules for your Gun Trust. Exhibits and Schedules must be referenced in your gun trust to avoid having your trust returned by BATFE as incomplete.

Exhibit 1 identifies remainder beneficiaries. You cannot be the sole trust beneficiary.

Schedule A lists current or pending National Firearms Act (NFA) assets, if any.

Schedule B is for conventional firearms or accessories. Generally it is referenced in the trust but not provided to the BATFE—to preserve your privacy.

Your trust must be "funded" i.e. it must own assets to be valid. People generally assign their **non-NFA** firearms and accessories to the trust when it is created. We provide additional forms for this purpose.

Transfers of **NFA firearms** to the trust require a BATFE-approved transfer in order for legal title to vest in the trust, but your trust can own the right to receive an approved NFA firearm at the time you pay your gun seller as well as the right to collect a refund. **Schedule A must list pending NFA firearms!**