



Tennessee Bar Association

## **TBA Succession Planning for Your Law Firm or Practice Workshop**

**Timothy L. Takacs, CELA**, *Takacs McGinnis Elder Care Law*, Hendersonville

Succession planning for your law firm or law practice should be at the forefront of all stages of your career. This includes opening your practice, transitioning to another firm, scaling back your practice due to disability or health, retiring, or closing your practice. This workshop will help you plan and manage your practice. We will also discuss law practice management, best practices, client communication, and life planning.

Attendees will learn how to develop their own plan using the Attorneys Planning Kit contained in this binder.

Topics include:

- Protecting your interests, your clients' interests, and the public's interests: legal and ethical challenges
- Succession planning: sale of the practice
- Planning for disability, death, and similar transitions
- Getting started: the Attorneys Planning Kit

**Total Credit: 3.00 Dual**

# Contents

<i>1. Personal Information</i>	<i>3</i>
<i>2. Business Information</i>	<i>12</i>
<i>3. Designation of Assisting Attorney</i>	<i>19</i>
<i>4. Sample Agreement between Affected Attorney and Assisting Attorney</i>	<i>20</i>
<i>5. 10 Essential Documents</i>	<i>23</i>
<i>6. Checklist for Office Procedure Manual</i>	<i>24</i>
<i>7. Sample Retainer Agreement Provision on File Retention</i>	<i>26</i>
<i>8. Sample Retainer Agreement Provision on Attorney Succession</i>	<i>27</i>
<i>9. Sample Attorney's Nomination of Successor Fiduciary</i>	<i>28</i>
<i>10. Sample Nomination of Attorney as Personal Representative</i>	<i>29</i>
<i>11. Sample Office Manual</i>	<i>30</i>

# \*\* Attorneys Planning Kit \*\*

Date: \_\_\_\_\_

## 1. Personal Information

### You

\_\_\_\_\_  
Work Address

\_\_\_\_\_  
Home Address

\_\_\_\_\_  
Phone (W)/(F)  
Phone (H)/(C)

\_\_\_\_\_  
Email (W)  
Email (H)

\_\_\_\_\_  
SSN

\_\_\_\_\_  
U. S. citizen?             Yes    No

\_\_\_\_\_  
Veteran?                 Yes    No

If Yes, dates of service:  
Branch of service:

### Your Spouse

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
 Yes    No

\_\_\_\_\_  
 Yes    No

If Yes, dates of service:  
Branch of service:

**Date and place of marriage:** \_\_\_\_\_

Place Where You Live	Since When?
Single-family home or apartment	
Same, but you need assistance	
Retirement living community	
Assisted-living facility	
Nursing home	
Other	
County of Residence:	

**Your Children**

Name

Name

Home Address:

Phone:

Email:

DOB:

Name

Name

Home Address:

Phone:

Email:

DOB:

Name

Name

Home Address:

Phone:

Email:

DOB:

**Are any of these persons dependent upon you, or have special needs? Yes  No**

Explain:

***Information About Your Health***

a. What medical or health problems do you currently have?

b. What medical problems have you had in the past?

c. When were you last in the hospital, and why?

d. What medications are you taking?

e. Who is your primary physician?

Name:

Address:

Telephone:

**Personal Finance**

**a. Monthly Income (Employment, pension, SS, VA, etc.)**

Source	Amount
Employment:	
Pension:	
Social Security:	
Other:	
<b>Total:</b>	

**b. Real Estate**

Address	Owner(s)	Tax Value	Mortgage	Date Acquired

**c. Non-qualified assets: bank accounts, CDs, annuities, brokerage, stocks, etc.**

Type of Asset	Company Name	How Is It Titled?	Beneficiary	Value

**c. Retirement plans, IRAs, etc.**

Type of Asset	Company Name	How Is It Titled?	Beneficiary	Value

**Insurance (Life, Health, Disability, Long-Term Care)**

**a. Life Insurance (including any policies through your employer)**

Life Insurance	Policy 1	Policy 2	Policy 3
Company Name			
Policy Owner			
Insured			
Beneficiary			
Death Benefit (face value)			
Current Cash Value (if any)			
Loan Against Policy (if any)			

**b. Other Insurance (describe the policy in the space provided)**

Type	
Individual/Group Health / Managed Care Plan	<input type="checkbox"/> No
Medicare / Medicare Advantage Plan (e.g. HealthSpring) / Medicare Supplemental	<input type="checkbox"/> No
Disability	<input type="checkbox"/> No
Long-Term Care	<input type="checkbox"/> No

**Large items of personal property you own (cars, boats, RVs, farm equipment, etc.)**

Personal Property (Item)	Value

**Estate Planning**

<b>Do you have any of the following documents?</b>	
<u>Durable Power of Attorney</u> /Names & contact information of your AIF / Successor:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<u>Health Care Power of Attorney</u> /Names & contact information of your HC Agent / Successor:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<u>Will</u> / Name & contact information of your Personal Representative:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<u>Revocable Trust</u> / Names & contact information of your Trustee / Successor Trustee:	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Have you made final arrangements: prepaid funeral, burial plots, cremation?** Yes  No

Explain:

**Have you made provisions for the disposition of your estate at your death?** Yes  No

Explain:



**Important Personal Contacts**

<b>Relationship</b>	<b>Name</b>	<b>Contact Information</b>
Attorney		
Accountant		
Financial Adviser		
Banker		
Insurance Agent		
Physician		
Other		
Other		
Other		

**Location of Important Personal Information** (Check the Box in the Second Column If Not Applicable or None)

Item	n/a	Location	Comments
Bank	<input type="checkbox"/>		
Bank	<input type="checkbox"/>		
Brokerage	<input type="checkbox"/>		
Retirement	<input type="checkbox"/>		
Other accounts	<input type="checkbox"/>		
Other accounts	<input type="checkbox"/>		
Other accounts	<input type="checkbox"/>		
Insurance			
Health	<input type="checkbox"/>		
Life	<input type="checkbox"/>		
Homeowners	<input type="checkbox"/>		
Auto	<input type="checkbox"/>		
Disability	<input type="checkbox"/>		
Long-Term Care	<input type="checkbox"/>		
	<input type="checkbox"/>		
Credit Card	<input type="checkbox"/>		
Credit Card	<input type="checkbox"/>		
Personal Loan	<input type="checkbox"/>		
Mortgage	<input type="checkbox"/>		
Deeds	<input type="checkbox"/>		
Titles (car, etc.)	<input type="checkbox"/>		
Tax Returns	<input type="checkbox"/>		
Divorce papers	<input type="checkbox"/>		
Discharge Papers	<input type="checkbox"/>		

Social Security statements	<input type="checkbox"/>		
Medicare card	<input type="checkbox"/>		
Birth certificate	<input type="checkbox"/>		
Marriage certificate	<input type="checkbox"/>		
Death certificate	<input type="checkbox"/>		
Citizenship papers	<input type="checkbox"/>		
Estate Plan documents	<input type="checkbox"/>		
Beneficiary designations (IRAs, etc.)	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		

<b>Item</b>	<b>n/a</b>	<b>Location</b>	<b>Who has access?</b>
Computer Passwords	<input type="checkbox"/>		
Software Passwords	<input type="checkbox"/>		
Website Passwords	<input type="checkbox"/>		
Computer Backups	<input type="checkbox"/>		
Post office or other mailboxes	<input type="checkbox"/>		
Storage Locker	<input type="checkbox"/>		
Safe Deposit Box	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		

## 2. Business Information

### Important Business Contacts

Relationship	Name	Contact Information
Law Partner		
Associates		
Office Manager		
Attorney		
Accountant		
Financial Adviser		
Insurance Agent		
Lessor		
Lessee(s)		
Assisting Attorney		
Successor Assisting Attorney		

**Location of Important Information** (Check the Box in the Second Column If Not Applicable or None)

Item		Location	Comments
Accounts Payable	<input type="checkbox"/>		
Accounts Receivable	<input type="checkbox"/>		
Credit Card	<input type="checkbox"/>		
Business Loan	<input type="checkbox"/>		
Payroll	<input type="checkbox"/>		
Inventory List	<input type="checkbox"/>		
Mortgages	<input type="checkbox"/>		
Deeds	<input type="checkbox"/>		
Titles (car, etc.)	<input type="checkbox"/>		
Tax Returns	<input type="checkbox"/>		
Maintenance Con- tracts	<input type="checkbox"/>		
Leases	<input type="checkbox"/>		
Insurance			
Health	<input type="checkbox"/>		
Life	<input type="checkbox"/>		
Malpractice	<input type="checkbox"/>		
Workers' Comp	<input type="checkbox"/>		
Property/Liability	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		

<b>Item</b>	<b>n/a</b>	<b>Location</b>	<b>Who has access?</b>
Computer Passwords	<input type="checkbox"/>		
Software Passwords	<input type="checkbox"/>		
Website Passwords	<input type="checkbox"/>		
Computer Backups	<input type="checkbox"/>		
Post office or other mailboxes	<input type="checkbox"/>		
Storage Locker	<input type="checkbox"/>		
Safe Deposit Box	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		

**Location of Client/Case/Professional Information** (Check the Box in the Second Column If Not Applicable or None)

Item		Location	Comments
Client List	<input type="checkbox"/>		
Current Cases List	<input type="checkbox"/>		
Current Case Files	<input type="checkbox"/>		
Closed Case Files	<input type="checkbox"/>		
Office Procedure / Policy Manual	<input type="checkbox"/>		

**My retention policy for closed files is:**

**My retention policy for original client documents (e.g. wills, trusts, deeds):**

No, I do not retain them.

Yes, I retain them. Identify which documents are retained, where they are located, and any arrangements that have been made to return them to the client:

**Are you an attorney-in-fact, trustee, agent for service of process, or serve in a fiduciary position for any client?** Yes  No

Explain:

**Professional, Business, and Civic Organizations**

Relationship	Name	Comments (Bar Numbers, etc.)
Bar Admissions		
Bar Associa- tions		
Business Groups		
Civic Groups		

**Are you an officer, board member, or serve in a fiduciary capacity for any organization?**

Yes  No

Explain:



**Business Finance**

**a. Annual Gross Income (Average over previous five years)**

Source	Amount
Fees:	
Rental:	
Non-legal:	
Other:	
<b>Total:</b>	

**b. Real Estate**

Address	Owner(s)	Tax Value	Mortgage	Date Acquired

**c. Bank accounts, CDs, brokerage, etc.**

Type of Asset	Company Name	Account #	Who has access?	Value
<b>IOLTA</b>				
<b>Main Operating Account</b>				

**c. Retirement plans offered by the Law Firm**

Type of Asset	Company Name	Account #	Who has access?	Value

**Insurance (Life, Health, Disability, Long-Term Care)**

**a. Life Insurance provided by the Law Firm**

Life Insurance	Policy 1	Policy 2	Policy 3
Company Name			
Policy Owner			
Insured			
Beneficiary			
Death Benefit (face value)			
Current Cash Value (if any)			
Loan Against Policy (if any)			

**b. Other Insurance (describe the policy in the space provided)**

Type	Check if No
Individual/Group Health / Managed Care Plan	<input type="checkbox"/>
Disability	<input type="checkbox"/>

**Large items of personal property owned by the Law Firm (cars, office equipment, etc.)**

Personal Property (Item)	Value

**3. Designation of Assisting Attorney**

I, \_\_\_\_\_, of \_\_\_\_\_ County, Tennessee, appoint my Assisting Attorney under the authority of Tenn. S. Ct. R. 9, § 29.9.

- 1. Assisting Attorney

\_\_\_\_\_

- 2. Successor Assisting Attorney

\_\_\_\_\_

If an Assisting Attorney is unable or unwilling to serve, s/he may appoint a Successor Assisting Attorney.

I authorize my Assisting Attorney:

- 1. To take control of all operating and client trust accounts, business assets, equipment, client directories, and premises that were used in the conduct of my practice;
- 2. To take control and review all client files of my practice, including documents and property in my possession or under my control belonging to any client;
- 3. To contact each client who can be reasonably ascertained and located to inform the client of my condition and of the appointment of an Assisting Attorney and discuss with the client various options for the selection of successor counsel;
- 4. In a case that is pending before any court or administrative body, to notify the appropriate court or administrative body and contact opposing counsel in the cases under my control and obtain additional time for new counsel to appear for the affected client;
- 5. To determine the liabilities of the practice and pay them from the assets of the practice; if the assets of the practice are insufficient to pay these obligations or for the expenses incurred by the Assisting Attorney to carry out the powers given pursuant to this part, the Assisting Attorney shall apply to my attorney-in-fact (AIF) or personal representative (PR) to obtain the additional funds that may be required; if the AIF/PR and the Assisting Attorney are unable to agree on the amount that is necessary for the Assisting Attorney to undertake the duties ordered pursuant herein, either party may apply to the court having jurisdiction over my estate for an order requesting funds from my estate;
- 6. To employ any person, including but not limited to my former employees, who may be necessary to assist the Assisting Attorney in the management, winding up, and disposal of the practice;
- 7. To create a plan for disposition of the practice to protect its value as an asset of my estate; and, subject to the approval of my AIF or PR, agree to the sale of the practice and its goodwill;
- 8. Subject to the approval of the AIF or PR of my estate, to reach agreements with successor counsel for division of fees for work in process on my active cases;
- 9. Subject to the prohibitions against soliciting cases, the Assisting Attorney may act as successor counsel for a client of mine.

I may be nominated as personal representative, guardian, conservator, agent or other fiduciary in one or more instruments executed by others. I may also hold the power to name successor fiduciaries in one or more such instruments. If I hold a power to name a successor, I hereby name my Assisting Attorney. If I have not been granted the express power to name a successor, then to the extent that I am able to do so I name my Assisting Attorney to serve as successor. If I have been appointed as guardian, conservator, or personal representative in any existing matter, I name my Assisting Attorney to serve as successor.

\_\_\_\_\_  
Attorney Date: \_\_\_\_\_

**4. Sample Agreement between Affected Attorney and Assisting Attorney**

The sample Contract includes authorization to sign on your bank accounts (trust and general) and to close your law practice. It does not include a provision for payment to the Assisting Attorney, a description of termination powers or consent to represent the Affected Attorney’s clients.

Agreement

This Agreement is entered into between

\_\_\_\_\_ (“Affected Attorney”), and

\_\_\_\_\_ (“Assisting Attorney”), and

\_\_\_\_\_ (“Authorized Signer”).

I, the undersigned Affected Attorney, authorize the undersigned Assisting Attorney, and any attorney or agent acting on my behalf, to take all actions necessary under the authority of Tenn. S. Ct. R. 9, § 29.9 to act upon my death, disability, impairment, or incapacity. These actions include, but are not limited to:

- To take control of all operating and client trust accounts, business assets, equipment, client directories, and premises that were used in the conduct of my practice;
- To take control and review all client files of my practice, including documents and property in my possession or under my control belonging to any client;
- To contact each client who can be reasonably ascertained and located to inform the client of my condition and of the appointment of an Assisting Attorney and discuss with the client various options for the selection of successor counsel;
- In a case that is pending before any court or administrative body, to notify the appropriate court or administrative body and contact opposing counsel in the cases under my control and obtain additional time for new counsel to appear for the affected client;
- To determine the liabilities of the practice and pay them from the assets of the practice; if the assets of the practice are insufficient to pay these obligations or for the expenses incurred by the Assisting Attorney to carry out the powers given pursuant to this part, the Assisting Attorney shall apply to my attorney-in-fact (AIF) or personal representative (PR) to obtain the additional funds that may be required; if the AIF/PR and the Assisting Attorney are unable to agree on the amount that is necessary for the Assisting Attorney to undertake the duties ordered pursuant herein, either party may apply to the court having jurisdiction over my estate for an order requesting funds from my estate;
- To employ any person, including but not limited to my former employees, who may be necessary to assist the Assisting Attorney in the management, winding up, and disposal of the practice;

- To create a plan for disposition of the practice to protect its value as an asset of my estate; and, subject to the approval of my AIF or PR, agree to the sale of the practice and its goodwill;
- Subject to the approval of the AIF or PR of my estate, to reach agreements with successor counsel for division of fees for work in process on my active cases;
- Subject to the prohibitions against soliciting cases, the Assisting Attorney may act as successor counsel for a client of mine.

I may be nominated as personal representative, guardian, conservator, agent or other fiduciary in one or more instruments executed by others. I may also hold the power to name successor fiduciaries in one or more such instruments. If I hold a power to name a successor, I hereby name my Assisting Attorney. If I have not been granted the express power to name a successor, then to the extent that I am able to do so I name my Assisting Attorney to serve as successor. If I have been appointed as guardian, conservator, or personal representative in any existing matter, I name my Assisting Attorney to serve as successor.

I appoint the undersigned Authorized Signer as signator, in substitution for my signature, on my lawyer trust account(s) upon my death, disability, impairment, or incapacity.

I authorize Authorized Signer to sign checks on my trust accounts and provide an accounting to my clients of funds in trust. My bank or financial institution may rely on the authorizations in this Agreement, unless such bank or financial institution has actual knowledge that this Agreement has been terminated or is no longer in effect.

For the purposes of this Agreement, my death, disability, impairment, or incapacity shall be determined by evidence the Assisting Attorney deems reasonably reliable, including but not limited to, communications with my family members or representative or a written opinion of one or more medical doctors duly licensed to practice medicine. Upon such evidence, the Assisting Attorney is relieved from any responsibility or liability for acting in good faith in carrying out the provisions of this Agreement.

Assisting Attorney and Authorized Signer agree to reserve client confidences and secrets and the attorney client privilege of my clients and to make disclosure only to the extent reasonably necessary to carry out the purpose of this Agreement. Assisting Attorney and Authorized Signer are appointed as my agents for purposes of preserving my clients' confidences and secrets, the attorney client privilege, and the work product privilege. This authorization does not waive any attorney client privilege.

[Strike through one of the following paragraphs:]

Assisting Attorney represents me and acts as my attorney in closing my law practice. Assisting Attorney has permission to inform the Professional Liability Insurance Carrier of my errors or potential errors. Assisting Attorney has permission to inform my clients of any errors or potential errors and to instruct them to obtain independent legal advice. Assisting Attorney also has permission to inform my clients of any ethics violations committed by me.

OR:

Assisting Attorney does not represent me and is not acting as my attorney in closing my law practice. While fulfilling the obligations of this Agreement, Assisting Attorney has permission to inform the Professional Liability Insurance Carrier of my errors or potential errors. Assisting Attorney may inform my clients of any errors or potential errors and instruct them to obtain independent legal advice. Assisting Attorney also has permission to inform my clients of any ethics violations committed by me.

Authorized Signer is not my attorney. Authorized Signer may inform my clients of any misappropriations in my trust account and instruct them to obtain independent legal advice or contact the Tennessee IOLTA security fund or other, similar entity.

I understand that neither Authorized Signer nor Assisting Attorney will process, pay, or in any other way be responsible for payment of my personal bills. I agree to indemnify Assisting Attorney and Authorized Signer against any claims, loss, or damage arising out of any act or omission by Assisting Attorney and Authorized Signer under this Agreement, provided the actions or omissions of Assisting Attorney and Authorized Signer were in good faith and in a manner reasonably believed to be in my best interest. Assisting Attorney and Authorized Signer shall be responsible for all acts and omissions of gross negligence and willful misconduct.

Assisting Attorney and/or Authorized Signer may revoke this acceptance at any time, and each has the power to appoint a new assisting attorney or authorized signer in Assisting Attorney's and/or Authorized Signer's place. My authorization and consent to allow Assisting Attorney and Authorized Signer to perform these and other services necessary under this Agreement do not require Assisting Attorney and/or Authorized Signer to perform these services. If Assisting Attorney and/or Authorized Signer revokes this acceptance, Assisting Attorney and or Authorized Signer must promptly notify me.

\_\_\_\_\_  
Affected Attorney

\_\_\_\_\_  
Date

\_\_\_\_\_  
Assisting Attorney

\_\_\_\_\_  
Date

\_\_\_\_\_  
Authorized Signer

\_\_\_\_\_  
Date

### **5. 10 Essential Documents**

1. Your Durable Power of Attorney or other appointment naming an Assisting Attorney to run your law practice
2. Assisting Attorney's contact information
3. Instructions for loved ones and the personal representation of your estate concerning your Assisting Attorney's duties in winding up your practice
4. List of current (open) cases
5. Instructions/rules for client file retention
6. List of passwords
7. List of law practice contacts (employees, clients, vendors, suppliers, memberships)
8. Copy of your bank's form for IOLTA access by Assisting Attorney
9. Letter for Assisting Attorney to notify clients of your death
10. Letter for Assisting Attorney to clients authorizing release of file to a successor attorney

You should attach the above documents to this Attorneys Planning Kit or give the location of each such document.

## **6. Checklist for Office Procedure Manual**

An attorney, especially a solo practitioner, should consider writing an office manual. Once complete, the manual should be stored in a safe, secure, readily-accessible location. The manual should then be periodically reviewed and updated. The following information should be considered for inclusion in the manual:

- Key personnel records (Office sharers, of-counsel attorneys, office manager, secretary, bookkeeper, accountant, landlord, malpractice carrier and other insurance brokers, personal representatives and other important contacts)
  - Names
  - Addresses
  - Phone Numbers
  - Service Descriptions
- Business And Trust Accounts:
  - Institution names and locations
  - Account numbers
  - Signatory name(s)
- Safety Deposit Box and Storage Facilities:
  - Location
  - Access information
- Computer And Voice Mail:
  - Access codes/passwords
- Important Business Documents
  - Leases
  - Maintenance contracts
  - Business credit cards
  - Client ledgers
  - Other books and records relating to business and trust accounts
- Computer Data and/or Hardcopy Backups of:
  - Conflicts
  - Calendaring backup
  - Time billing records
  - Accounts receivable/payable
  - Active client file inventory
  - Closed file storage location and inventory

From *Handbook for Withdrawing from the Practice of Law* (Maine Bar Overseers, 2009)



***Other important manual provisions:***

1. How to check for a conflict of interest;
2. How to use the calendaring system;
3. How to generate a list of active client files, including client names, addresses, phone numbers, and other contact information;
4. Where the client ledgers are kept for trust accounting and billing purposes;
5. How the open/active files are organized;
6. How the closed files are organized and coded;
7. Where the closed files are kept and how to access them;
8. The office policy on keeping original client documents and any sample retainer agreement language applicable to the policy, as well as when that sample retainer agreement language began to be used;
9. The office policy on keeping client original documents and where original documents, if any, are kept;
10. The office policy on scanning documents, where such information is kept, and how to access it;
11. The office policy on document creation and saving, and maintaining digital information, where such information is kept, and how to access it;
12. Whether the office has a safe deposit box and how it may be accessed;
13. The bank name, address, account signers, and account numbers for all law office bank accounts;
14. A description of the law office's computer system, network, online and social media presence, etc.;
15. Where to find, or who knows about, computer / software / online passwords;
16. How the case management and billing software works, where copies of the most recent invoices are kept, etc.;
17. Where vendor contracts can be found for the law office;
18. Where applicable insurance policies can be found.

See the sample "Law Office Manual of Ann Attorney" appended to this Kit.

### ***7. Sample Retainer Agreement Provision on File Retention***

Client understands that files utilized and retained by Attorney are ultimately the property of Client. At the conclusion of the representation, Client may request return of all original documents and copies of any portion of the file. Attorney may destroy all remaining portions of the file at any time after twenty-four months after the conclusion of the legal representation, and Client hereby consents to the destruction of the file without further notice to Client.

***8. Sample Retainer Agreement Provision on Attorney Succession***

Client specifically consents to the disclosure of client confidences to one or more attorneys selected by Attorney, or Attorney's attorney-in-fact, personal representative, conservator, or successor in interest, provided that such disclosure shall be for the limited purpose of securing legal representation for Client in the event of death or disability of Attorney or the cessation of Attorney's law practice.

**9. Sample Attorney's Nomination of Successor Fiduciary**

I may be nominated as personal representative, guardian, conservator, agent or other fiduciary in one or more instruments executed by others. I may also hold the power to name successor fiduciaries in one or more such instruments. If I hold a power to appoint a successor, I hereby name [Successor]. If I have not been granted the express power to name a successor, then to the extent that I am able to do so I hereby nominate and appoint [Successor] to serve as successor fiduciary in each such case. If I have been appointed as guardian, conservator, or personal representative in any existing matter, I nominate and appoint [Successor] to serve as successor.

**10. Sample Nomination of Attorney as Personal Representative**

I nominate and appoint [Attorney], Attorney at Law, to serve as my Personal Representative. I further grant to [Attorney] the power to appoint a successor Personal Representative in the event that s/he is unable or unwilling to serve, or ceases to serve, for any reason. The power to appoint a successor Personal Representative may be exercised by any writing, including a Will, whether or not it refers specifically to this power.

***11. Sample Office Manual***

LAW OFFICE MANUAL  
OF  
ANN ATTORNEY

Effective January 1, 1999

©1998 Ruth E. Ratzlaff

- Table of Contents
- Hours of Operation
- Staff
- Client Files
  - File folders
  - File storage
- Previous Office Files
- Consultation Files
- 3 x 5 Cards for Client Information and Conflict Checks
- Appointments
- Malpractice Insurance
- Calendaring of Deadlines
- Physical Location of Ann's Personal Information
- Legal Referral Services
- Ann's Organizations
  - Scholarship
  - Innovative Member Services
  - Neighborhood
- Trust Account
- General Bank Account
- Computer Internet Services
- Office Building
- Office Furniture and Equipment
- Organization of Computer Files
  - Client files
  - Quicken files

## Hours of Operation

The office is ordinarily open 8:30 to 12 noon and 1 p.m. to 5 p.m. Arrangements are made with the next-door office of Dr. Fred Schmedlap to accept deliveries that are anticipated when the office is closed during regular office hours. The answering machine and fax machine are on 24 hours a day. Court holidays are office holidays. Ann usually comes in but usually doesn't take phone calls or see clients.

Ann frequently stays after 5 p.m. and is in the office on weekends. She does not answer the telephone during those hours unless she is specifically expecting a call.

## Staff

Susie Secretary is the legal assistant. Her duties include answering the telephone for both Ann Attorney and Space Sharer. She also does incidental work for Space, including opening mail and dealing with client crises in Space's absence. She is, however, primarily Ann's assistant.

Her further duties include working on Ann's cases, handling Ann's files, keeping Ann's calendar and making appointments for Ann's clients. She does Ann's bookkeeping and the court accounting work for a number of clients. She is very good at answering client's questions without bothering Ann. She orders supplies for Space and Ann.

She is also used as a sounding board for tricky situations to help Ann devise her strategy.

She is paid every other Friday. Susie prepares payroll using QuickPay on her computer. She also prepares the employer tax returns, which are stored in her desk.

She earns two weeks' paid vacation a year. She gets court holidays as paid holidays. Her vacation time records are kept on a 3 x 5 card in the small wooden box on her desk. She gets unlimited sick leave, which she seldom needs. Her health insurance premiums are paid.

She is an "at will" employee, without a written employment contract.

## Client Files

Files are opened for new matters of substance. (See Consultation Files below for less-substantial matters.) Ann completes the Client Information Sheet that Susie started when she made the appointment for the client. Ann gives Susie the Client Information Sheet after her first meeting with the client, together with her notes from the meeting and any other related paperwork.

*File folders* Susie opens a file by taking a small black book titled "Record" on the bookcase behind her desk. She enters the next number in sequence, the name of the client and the name of the matter and the date. That number becomes the file number.

A file folder is then prepared. Files are color-coded: green folders are used for conservatorships, red folders for estate planning, blue folders for Medi-Cal planning, brown folders for decedent's estates, and yellow folders for miscellaneous matters. A color-coordinated file folder label is typed with the file number, the client name, and the matter name.

*File storage.* Decedent's estate files are kept in numerical order in the bottom drawer of the two-drawer lateral cabinet closer to the supply closet. The top drawer is all other, shorter-term files, also in numerical order.



Ongoing conservatorship files are kept in the two four-drawer file cabinets, with the last name of the conservatee on the drawer. (Larger decedent's estate folders may also be in those drawers.)

Closed files are stored in boxes in Ann's garage in numerical order. Periodically, Ann reviews the closed files and destroys some. Destruction of a file is memorialized by a "D" being written in the Record book by that file's opening entry.

#### Previous Office Files

From 1983-1985, Ann had an office in Small Town with Joe Blow and Tom Farmer. Tom has most of those old files in a storage shed at his farm outside of Small Town. He no longer practices law. Duane is with the Conflict Resolution Center at Kings River University.

Ann has a few files from that era, which are mostly in her garage. For ongoing cases, some of those Previous Office files have been transferred to be current files.

#### Consultation Files

For brief matters (perhaps just an appointment and no document production), a Client Information Sheet is completed and placed with Ann's notes from the appointment and related correspondence in a Consultation File, kept by month. That file folder is located in the bottom drawer of the two-drawer lateral file cabinet farther from the storage closet. Rather than a file number, the 3 x 5 card (see below) includes the date of the consultation.

#### 3 x 5 Cards for Client Information and Conflict Checks

When a file is opened (full-fledged or consultation) a white 3 x 5 inch card is prepared for alphabetical placement by last name in the two-drawer container next to the fax machine. The card includes the file number, a person's name, the matter name, and the person's address and telephone number.

A card is prepared for everybody in the file who doesn't have the same last name and address. If the person on the card is deceased, the executor or trustee's name is referenced. If the person is a conservatee, the conservator's name is referenced.

If the person is adverse to our client's interest, a yellow 3 x 5 card is prepared with the same information. (Not all adverse parties in the drawer are on yellow cards.)

#### Appointments

Initial appointments are set preferably for 10:30 a.m. or 2:30 p.m., preferably not on Monday or Friday. Appointments for signing documents can be made at other times. Ann is open to setting appointments in the evenings or on Saturday, but her availability must be checked. Ann is also open to making home or nursing home or hospital visits.

Availability of appointment times must be checked in Amicus Attorney's computerized calendar function. Ann and Susie also put their personal appointments on the office calendar, so client appointments don't get mixed up with dental appointments.

Space Sharer makes her own appointments and keeps her own calendar. She will return calls from potential clients and do a brief, free consultation on the telephone to determine if they want to retain her services. If she isn't in the office and the matter seems urgent (or is from a current client and is urgent), Space can frequently be reached at home or by cell phone or pager to return the call. Those numbers are on Susie's

Rolodex.

#### Malpractice Insurance

Ann's malpractice insurance policies for the time after August 1985 are in the bottom drawer of the two-drawer lateral file cabinet more distant from the storage area. The policy year is the calendar year. The policy is sometimes paid for the full year in December, and sometimes in payments.

#### Calendaring of Deadlines

The small wooden box on Susie's desk is supposed to be a perpetual calendar, but that function has been neglected since the installation of the Amicus Attorney computerized calendar system. Susie has a list of when conservatorship accountings are due.

Notes are put into the Amicus Attorney calendar ahead of certain deadlines. Ann is reminded at the beginning of any month when estimated taxes are due. In any probate where a Form 706 will be required, the deadline is calendared 60 days in advance.

#### Physical Location of Ann's Personal Information

Ann's will and powers of attorney for property management and health care are in the bottom drawer of a two drawer file cabinet in her office at home in a clearly-labeled manila envelope. They are located with her office disability insurance and disability overhead insurance policies. Ann's husband, Tom Ratson, is named executor of the will and agent under the powers of attorney. Ann's sister, Social Worker, is the alternate executor and agent. Telephone numbers for both Tom and Social are on Ann's Rolodex.

Ann's will and powers of attorney are also on her computer at the office in the form in which they were signed, in case the house burns down.

#### Legal Referral Services

Ann is signed up for the legal referral service of Advocates for Nursing Home Reform. The referrals are infrequent.

Ann is no longer signed up with the County Bar Association legal referral service.

Information about the panel memberships (application, terms, etc.) are in the bottom drawer of the two drawer lateral file cabinet more distant from the supply closet.

#### Ann's Organizations

*Scholarship.* Ann has served for years as the chair of the County Bar Association Scholarship Committee. Information about the scholarship committee process is contained in a Handbook which is in Ann's computer at C:\WPDOCS\SCHOLARSHIP\HANDBOOK. The Scholarship Application form and information form are also in that subdirectory.

Historical information about the scholarship is in a box in Ann's furnace room at home. Further information is in the four-drawer file cabinet in her office.

*Innovative Member Services Task Force.* For 1998-99, Ann is chairing the Innovative Member Services Task Force for the County Bar Association. The folder on that committee is in Ann's desk's file drawer.

*Neighborhood.* Ann has the original incorporation and tax documents for the Neighborhood Preservation Association in the bottom drawer of her file cabinet. There are some books for that organization's library in a box in Ann's furnace room at home, in the event they ever open an office. They can have the incorporation papers at that time as well.

#### Trust Account

Ann's attorney-client trust account is with Bank of America. The information is in Quicken 98 on Ann's computer and the statements are in the file drawer in her desk.

#### General Bank Account

The office general account is with Regency Bank. Information about the account is in Susie's computer in Quicken 98. Receipts and disbursements are entered by category. Some regular disbursements (rent, for example) are entered automatically.

#### Computer Internet Services

Ann has an internet account on her office computer with PacBellNet. That is billed monthly on a credit card.

#### Office Building

Ann and Space signed a five-year lease for Suite 500 in 1995. The lease file is in the lower drawer of the two drawer lateral file cabinet farther from the supply closet. The rent is paid to North County Investors, with offices in Suite 920. Lou Manager is the office manager and the person to page for facility problems. Her pager number is on Susie's Rolodex. Her husband, Jack Manager, does some maintenance, mostly on weekends.

#### Office Furniture and Equipment

Ann and Space have jointly purchased or acquired the various items in the common areas, with the exception of Susie's furniture and equipment, which were purchased by Ann, and several table ornaments in the waiting room, which are Space's.

Instruction manuals for the various items (if they exist) are in file folders labeled by the item brand name or description in the bottom drawer of the two-drawer lateral file cabinet more distant from the storage area.

Ann has used Jim Computer of Computer Consulting for computer upgrades and problems.

#### Organization of Computer Files

*Client documents.* On Ann's computer, wills and related powers of attorney are stored in the directory C:\WPDOCS\WILLFORM. Master forms are also in that directory. Trusts and related documents are stored in the directory C:\WPDOCS\TRSTFORM, including master forms and recent client files. Conservatorship pleadings are in the directory C:\WPDOCS\CONSERVA. Some cases have sub-directories with the conservatee's last name. For example, documents related to the Joe Smith conservatorships are located in C:\WPDOCS\CONSERVA\SMITH. Probate documents are the same way: C:\WPDOCS\PROBATE.

If Win95 long file names are used, things are fairly self-explanatory. If DOS file names are used, it's a

bit more challenging. Frequently the first part is the party's last name and the extension is the type of document. ATTORNEY.WIL would be Ann's will. For pleadings, a Petition in the Conservatorship of Joe Smith to establish a trust might be SMIT-TST.PET. The order on that petition would be SMIT-TST.ORD.

*Quicken files.* The office Quicken file is QDATA stored on Susie's computer. The file is backed up weekly on Thursday after checks are written. The backup file is in a computer disk box on the bookcase behind Susie's desk. Older archived Quicken office files are named QDATA95, for example.

Client files that are on Quicken are under the last name of the decedent or conservatee or client.