

*Please take a moment to complete this questionnaire. Your report will be posted on the “Estate Planning Day” tab of [www.naepc.org](http://www.naepc.org) so all councils can view the information and to assist those councils that are considering an event.*

Affiliated Local Estate Planning Council Name & Location	Name: Bristol County Estate Planning Council City: Fall River State: Massachusetts
What date(s) did you/are you planning to hold your public estate planning day program? Was this timeframe chosen for a specific reason?	Saturday, October 16 <sup>th</sup> , 2010
Did you team up with any other professional associations or groups to host the event?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, please list:
Did you utilize the organizational materials or technical presentation provided by The NAEPC Foundation?	<input checked="" type="checkbox"/> Yes, we used the organizational materials <input type="checkbox"/> Yes, we used the technical presentation <input type="checkbox"/> We did not use either set of materials
Please tell us what made/makes your program unique or different.	We have done a lot of preparation work and received some great corporate sponsorship thus far.
What was/is your biggest challenge in planning the program and how did you overcome it?	Location, location, location; Site visits and ongoing negotiations with host location for more space.
How did you promote the event to the public?	We are advertising in papers, free media, radio and plan television spots
Did you charge a registration fee to attend?	<input checked="" type="checkbox"/> Yes, we charged \$ <u>10</u> to attend <input type="checkbox"/> The program was available free of charge
Did you provide your attendees take-away information?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes, we provided the following materials: Not completed
Please note any information you feel would be valuable to those considering a program here...	
May interested councils contact your council with questions? If yes, please list the name, telephone and email for most appropriate person to receive request.	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes, please contact: Richard E. Bergeron, CFP®, ChFC (508) 851-3603/3639

Please attach the following to your submission:

- program outline/schedule
- budget (if available/willing to provide)
- related materials you feel would be helpful to councils considering a program

*Please return this questionnaire and related materials to [eleonor@naepc.org](mailto:eleonor@naepc.org).*