

INFORMATION NEEDED FOR A WILL

1. What is your name? _____
2. What is your date of birth? _____ Social Security # _____
3. Address _____
Street City State Zip
4. Are there any other names that you use, i.e., John Smith; John B. Smith; John Baines Smith?
List all: _____
5. How do you usually sign your name, in other words, what is your usual signature?

6. What is your current marital status? Single _____ Married _____
7. Do you have any children? Yes _____ No _____ If so, how many? _____
8. Have any of your children died? If so, please give their name(s) and date(s) of birth:

9. What are your childrens' names and dates of birth? _____

10. If any of your children are minors, who would you name as guardian in the event of your death? What is that person's relationship to you? _____

11. In the event of your death, who do wish to name as executor of your estate, that is, the person in charge of distributing your estate *after your death*, according to your wishes?

12. What relationship is this person to you? (Brother, sister, friend,, etc.) _____
13. If the person you named above cannot or will not serve as your executor, is there a person you would care to name as an alternate? If so, who and what is their relationship to you?

14. Would you care to name another alternate as well? If so, what is their name and what is their relationship to you?

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15. Is there any person(s) related to you who you wish to disinherit by name? If so, give their name and relationship: _____

16. How do you wish to distribute your estate?

A. Everything to your spouse and then your children equally and to your grandchildren if your child(ren) are deceased? Yes _____ If not then go to next question.

B. Please state how you wish your estate to be distributed:

17. Is there any particular real estate or vehicle you wish to give to a specific person (s)? If so, please give their name(s), relationship to you, and the property you want them to have. Also, please provide the deed to the property: _____

18. Make any notes here pertaining to your Will not covered in the questions above:

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IF YOU BECAME INCAPACITATED OR DISABLED...

19. Who would you name to handle your business affairs, i.e., write checks for you, pay your bills, etc.? What relationship is this person to you?

20. If the person you have named above cannot or will not act on your behalf, who do you name as an alternate and what is their relationship to you? _____

21. Would you care to name another alternate? _____

IF YOU WERE UNABLE TO MAKE YOUR OWN DECISIONS FOR MEDICAL CARE OR TREATMENT...

22. Who would you name to make medical decisions for you **if you were unable to speak for yourself**? What relationship is this person to you? _____

23. If the person you have named above cannot or will not make medical decisions for you, who do you name as an alternate and what is their relationship to you? _____

24. Would you care to name another alternate? _____

This is the last page of questions