WILL QUESTIONNAIRE

TESTATOR:
(Last) (First) (Middle Initial)

SPouse:
(Last) (First) (Middle Initial)

CHILDREN:
(Last) (First) (Middle Initial)
(Last) (First) (Middle Initial)
(Last) (First) (Middle Initial)
(Last) (First) (Middle Initial)

DISINHERIT CHILDREN? Y/N

IF YES, WHO: ____________________________

PERSONAL REPRESENTATIVE:
(Last) (First) (Middle Initial)
ALTERNATE PR:

(Last)  (First)  (Middle Initial)

HOW IS ESTATE TO BE DISTRIBUTED UPON DEATH?


DO YOU HAVE MINOR CHILDREN?  Y/N

IF YES, WHO SHOULD BE THE GUARDIAN?

(Last)  (First)  (Middle Initial)

ALTERNATE:

(Last)  (First)  (Middle Initial)

WOULD YOU LIKE YOUR WILL TO SPECIFY BURIAL, CREMATION, OR NONE?
WOULD YOU LIKE A TRUST IN YOUR WILL? WHAT ARE YOU ATTEMPTING TO ACCOMPLISH?

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FOR WHO?

(First) (Middle Initial)

(First) (Middle Initial)

(First) (Middle Initial)

PLEASE LIST THE ASSETS WITH AND VALUE OF YOUR ESTATE:

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PLEASE LIST ANY DEBTS OF YOUR ESTATE:

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WHO WOULD YOU LIKE TO ACT AS POWER OF ATTORNEY FOR FINANCES AND HEALTH?:


WHO WOULD YOU LIKE TO ACT AS ALTERNATE POWER OF ATTORNEY FOR FINANCES AND HEALTH?:


