

WILL QUESTIONNAIRE

Your name (include middle initial):

Spouse's name:

post office mailing address:

actual location of home:

phone number:

1. **What is a good estimate of the total value of your estate?** \$ _____

List your assets and for each, please indicate if you are the **sole owner** or if it is owned in **joint tenancy** with someone else (on one owner's death, the property passes to the surviving joint tenant) or if it is owned as **tenants in common** with someone else (on one owner's death, his/her share goes to heirs) .

Real estate: \$ _____

Location: _____

Value of other assets like cars and stock: \$ _____

Which stocks do you own?

1. _____

2. _____

3. _____

4. _____

Cash: \$ _____

Antiques: \$ _____

If possible, please compile a list.

Annuities: \$ _____

Who is the annuity beneficiary? _____

Address: _____

2. **Do you have life insurance?** _____

If yes, how much? \$ _____

Who is the beneficiary? _____

Who owns the policy? _____

Who pays the premiums? _____

3. **Selection of your executor:** List a primary executor and an alternate, in case your primary cannot serve. Use full names, with middle initials and a current mailing address. This is a considerable responsibility. Be sure to discuss this with the person you are selecting.

1. Primary executor: _____

address: _____

2. Alternate executor: _____

address: _____

4. **How you want to dispose of specific property:** If you want certain persons to receive certain property or money, list the person's full name and address and describe the item in detail. If you want to list an alternate, in case the primary person has pre-deceased you, please do so. In order to avoid making future changes to your will if you have changed your mind, it is worth considering simply drafting a letter to go with your will. In this letter, you dispose of your tangible personal property (not cash) and you request that your executor give out this property according to the letter. Continue on reverse.

1. Item: _____

recipient: _____

relationship of recipient to you: _____

2. Item: _____

recipient: _____

relationship of recipient to you: _____

5. Whom you want to receive the remainder of your estate (this is called the "residuary clause"): This clause distributes all your other property without specifying any particular item. In "mirror image" wills done by couples, usually everything goes to the surviving person first. On the death of the second, everything usually goes to any children.

1. Primary recipient: _____

relationship of recipient to you: _____

address: _____

2. Alternate recipient: _____

relationship of recipient to you: _____

address: _____

6. Your family: Please list on the other side all living members of your family, including parents, brothers and sisters, spouse, children and grandchildren.

7. Other:

1. Appointment of a guardian and alternate for a minor child - list complete name and address:

2. Appointment of a trustee and alternate to oversee property of a minor child - you can have the trust terminate when the child turns 18, 21, or at some other age. List complete name and address:

3. List here any particular questions or situations which you would like addressed in your will:

8. **Estate and Inheritance taxes:** These tax laws change frequently. If your estate exceeds whatever the current federal limit is, you would benefit from the advice of an estate planner. I can provide you with a referral.

9. **Check any of the following documents which you may be interested in signing:**

_____ **Durable power of attorney for health care (appoints a person to make all of your health care decisions if you are unable to so) and Living Will. Please provide the name and address of your primary agent and an alternate agent. ***

_____ **Durable power of attorney for financial matters (appoints a person to make all decisions regarding your personal finances). Please provide the name and address of your primary agent and an alternate agent. ***

_____ **Appointment of Guardian (appoints a guardian for you and your property if you are unable to take care of your own matters). Please provide the name and address of your primary guardian and an alternate.***

* These documents are particularly important if you and someone else are in a relationship but not married. Absent a clear indication from you that you want the person with whom you are in the relationship to make medical decisions, etc. for you, a family member may be able to step in and exclude this person.