

WILL and POWER OF ATTORNEY QUESTIONNAIRE

PRINT YOUR FULL NAME (FIRST, MIDDLE, LAST):

ADDRESS: _____

PHONE NO. _____

HAVE YOU EVER BEEN KNOWN BY ANY OTHER NAME, if so, list:

ARE YOU A US CITIZEN? ___ Date of Birth _____

DO YOU CURRENTLY HAVE A WILL? ___ NO ___ YES

MARITAL STATUS: ___ NEVER MARRIED ___ NOW MARRIED ___ DIVORCED/WIDOWED
SPOUSE'S NAME (if living):

PLEASE LIST THE NAME, BIRTH DATE and CITY, STATE OF YOUR CHILDREN:

WHO IS THE PERSON YOU WISH TO NAME AS PERSONAL REPRESENTATIVE (EXECUTOR) OF YOUR WILL [print the person's name and his or her relationship to you]:

Is this the same person who you want to designate as primary agent for your power of attorney?
If not, write the agent's name and relationship below:

DO YOU WANT TO HAVE AN ALTERNATE PERSONAL REPRESENTATIVE (and/or POA Agent?) NO ___ YES (Print information on next line)

HOW AND TO WHOM DO YOU WANT TO LEAVE YOUR PROPERTY WHEN YOU DIE?

If any of the person(s) named above does not outlive you, then who do you want to have that share of your property?

If you have any beneficiaries who are minors at the time of your Death, the surviving parent would generally be their Legal guardian. Please explain if you wish someone else. (Print the Person's name and relationship to you:

Do you wish to name a successor guardian? No If yes, print the person's name and relationship to you:

Make notes below about anything else about your will that you
Want to discuss with your attorney:

Sign: _____ Date: _____

On the reverse side of this questionnaire list your major assets, including retirement funds, life insurance and annuities; regular sources of income; and your significant financial liabilities and any particular functions you would like the Agent to be able to perform or not perform (e.g. gifts, health decisions, etc.)