

## WILL WORKSHEET

### WALK-INS ON MONDAYS FROM 0900-1130.

Getting Started. You and, if married, your spouse, should read the following questionnaire. Please bring your completed questionnaire with you when you consult with your attorney. Your attorney may need to see other documents (e.g. deeds to real property). NOTE: If both you and your spouse will see the same attorney for estate planning advice, be sure to discuss a dual representation waiver to avoid conflicts later.

### PERSONAL INFORMATION

Client's Full Name: \_\_\_\_\_ SSN: \_\_\_\_\_

UNIT: \_\_\_\_\_

Are you a U.S. Citizen? Y \_\_\_\_\_ or N \_\_\_\_\_ Is your spouse a U.S. Citizen? Y \_\_\_\_\_ or N \_\_\_\_\_

What is your state of Residence? \_\_\_\_\_ Is this where you will retire? Y \_\_\_\_\_ or N \_\_\_\_\_

### MILITARY STATUS

I am Active Duty \_\_\_\_\_ Retired Military \_\_\_\_\_ Married to Active Duty \_\_\_\_\_ Married to Retiree \_\_\_\_\_ Active duty Dependent \_\_\_\_\_ Retiree Dependent \_\_\_\_\_ Other (Specify) \_\_\_\_\_

MARITAL STATUS: (Select the most appropriate) Married \_\_\_\_\_ First Marriage? Y \_\_\_\_\_ or No \_\_\_\_\_. Widowed \_\_\_\_\_ Divorced \_\_\_\_\_ Single \_\_\_\_\_

If Married, Full name of client's spouse \_\_\_\_\_

Client's current address \_\_\_\_\_ Purchasing home? Y \_\_\_\_\_ or N \_\_\_\_\_

Contact Numbers: H \_\_\_\_\_ C \_\_\_\_\_ Spouse \_\_\_\_\_ O \_\_\_\_\_

Email: Client's \_\_\_\_\_

Spouse's \_\_\_\_\_

**FUNERAL ARRANGEMENTS:** You may have a strong desire to regarding your funeral (for example, burial or cremation) that you wish to include in your will. As a practical matter, your funeral may have been carried out by the time your will is read. Therefore, you should tell the appropriate family members of your desires NOW! At my death, I prefer: to be cremated \_\_\_\_\_. To have my body given for medical or scientific purposes \_\_\_\_\_. To be buried at a specified gravesite or location \_\_\_\_\_. Please specify location \_\_\_\_\_. To be buried with full military honors (you may select this option in addition to one of the above) \_\_\_\_\_. I do not wish to express my desires concerning my remains in my will and leave this decision to those who survive me \_\_\_\_\_. Other \_\_\_\_\_

**CHILDREN:** How many children do you have (including adopted and stepchildren)? \_\_\_\_\_

Child(ren) Full name	Gender	Age	Circle (Natural, Adopted, Step)
1. _____	_____	_____	N A S
2. _____	_____	_____	N A S
3. _____	_____	_____	N A S
4. _____	_____	_____	N A S

**DISTRIBUTION OF ESTATE TO CHILDREN:**

With regard to minors who may inherit under your will, do you want their gifts to be:

Paid at the election of the executor (the executor may pay the child some of all of the gift, at various times, as the executor sees fit, even though the child is a minor)\_\_\_\_\_

Held in trust until the child is no longer a minor (or has reached the distribution age you specified). If you do (or were to) have stepchildren or adopted children, would you want to:

Expressly include them in your will (treat them the same as natural children)\_\_\_\_\_

Expressly exclude them from your will\_\_\_\_\_

Have the will remain silent as to stepchildren and adopted children\_\_\_\_\_

Is any child of yours in fact a stepchild or adopted child? Y\_\_\_\_ or N\_\_\_\_\_

**VALUE OF ESTATE:** To determine what type of will is appropriate for you, we need an estimate of your estate. For this purpose, include the value of all the property you own in your name, and if married, the value of your spouse’s property. If any of your property secures a debt (for example, a mortgage on your home), include your equity in the property. Also include the value of your life insurance policies (SGLI, VGLI, etc). Note that life insurance ordinarily does not pass according to your will; it will go to the beneficiaries you designated in the policy. The policy’s face values is usually included in determining whether estate taxes will apply in your case.

Approximate value of your estate (not including life insurance): \$ \_\_\_\_\_

Approximate value of your spouse’s estate (Not including life insurance): \$ \_\_\_\_\_

Total value of both estates including life insurance: \$ \_\_\_\_\_

\* Note: If you think the value of your estate exceeds a certain amount, it may be subject to estate taxes. Complete proper planning can help you minimize estate tax. Depending on your estate, its complexity may exceed the expertise of the local DoD Legal Assistance Attorney. If so, we may refer you find an estate planning expert.

**REAL ESTATE:** Please bring copies of your real estate deeds to the legal assistance attorney.

Do you have a farm or family-owned business? Y\_\_\_\_ or N\_\_\_\_\_

Do you own real estate other than jointly with your spouse? Y\_\_\_\_\_ or N\_\_\_\_\_

If yes, How do you wish to give your real estate? All to my spouse\_\_\_\_\_ To pass with the rest of my estate\_\_\_\_\_ Other (Specify)\_\_\_\_\_

**PERSONAL EFFECTS AND TANGIBLE PERSONAL PROPERTY:** How do you wish to give your personal property? All to my spouse\_\_\_\_\_ Specific items are to go to specific individuals, with all items not listed passing to my spouse (Please attach detailed list of items, beneficiaries, and relationship to you).\_\_\_\_\_ Specific items are to go to specific individuals, with all items not listed passing with the rest of my estate (Please attach detailed list of items, beneficiaries, and relationship to you)

\_\_\_\_\_ To pass with the rest of my estate\_\_\_\_\_ Other (Please explain)

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**SPECIFIC BEQUESTS:** You may make specific gifts of cash, real estate, or personal property to specific people or charities in your will. However, these bequests will be distributed first and may deplete your estate. Also, specific bequests may complicate probate if the probate if the property given cannot be found at your death. Therefore, if you make specific bequests, only give property or amounts of cash that you are reasonably sure you will have when you die. If you make no specific bequests, all of your property will pass to your primary beneficiaries. Do you wish to make any specific bequest in your will? Y\_\_\_\_ or N\_\_\_\_\_. If yes, please list your specific bequest(s) and who you want to receive it (them).

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**RESIDUARY ESTATE:** Your residuary estate is whatever property remains after paying debts and expenses of administration, and any specific requests. Because many people do not make specific bequests, the “residuary” usually describes all the property left to your beneficiaries. To whom do you want to leave your residuary estate? All to my spouse if he/she survives me, and if not, then to my children and issue\_\_\_\_\_. Other (Please list name, relation, and percent each is to receive)\_\_\_\_\_

NAME\_\_\_\_\_ RELATIONSHIP\_\_\_\_\_ SHARE\_\_\_\_\_%

NAME\_\_\_\_\_ RELATIONSHIP\_\_\_\_\_ SHARE\_\_\_\_\_%

If any of your beneficiaries is a minor, at what age do you want them to receive their gift?

18\_\_\_\_ 21\_\_\_\_ Some other age (Please indicate age)\_\_\_\_\_. Please note selecting an age greater than 21 will likely require a trust, which may cause your estate to incur additional expenses for the administration of the trust. These would lower the amount available for your beneficiaries.)

**EXECUTOR:** Your Executor (or in some states, “personal representative”) ensures your estate is settled upon your death. This ordinarily involves going through “probate,” a court-administered procedure for settling an estate as provided in your will or under State Law. Probate involves petitioning a court for letters of appointment, settling creditor claims, finding and distributing assets, and filing any necessary tax returns. Any adult may serve as your executor, although many states prefer or require an executor who is a legal resident of the State where probate is conducted. Therefore, if possible, you should select family members or responsible friends who are residents of the same State as your legal residence or the state where you own real estate. (The following states may require your executor to be a resident of that state unless your executor is a close relative:

Whom do you wish to have as your executor?

Executor:\_\_\_\_\_

Successor:\_\_\_\_\_

The Successor will only act if your first choice is unable to be your executor.

**GUARDIAN:** If your children are minors when you die, and if the other natural parent is not alive or for any reason cannot act as guardian, the court will normally appoint the person(s) you name to act as legal guardian(s) of your minor children. The individual(s) named will have physical control and custody of the children until they reach 18. If you are divorced, the court will usually appoint the child’s natural parent- your former spouse as guardian, even if you provide otherwise in your will. You should still name a guardian, however, in case your former spouse dies before you, or for any reason cannot act as the guardian. If you wish to appoint someone, who? Please list name, relationship, and city and state of their residence.

1<sup>st</sup> choice\_\_\_\_\_

2<sup>nd</sup> choice (Optional) \_\_\_\_\_

3<sup>rd</sup> choice (Optional) \_\_\_\_\_

**DISINHERITING SOMEONE:** Do you wish to disinherit someone (Give someone nothing on purpose)?

Name \_\_\_\_\_ Relationship \_\_\_\_\_

If you wish to disinherit your spouse, do you want your executor to have the authority to disburse your property, outright or in trust, to minimize any “right of election” your spouse might have under the laws of any jurisdiction? Y \_\_\_\_\_ or N \_\_\_\_\_. {Many states provide a spouse a “right of election” or the choice to apply State law instead of your will’s provision for your spouse. For example, if you left your spouse only a small amount of property, the State where your will was probated might have a law allowing your spouse to choose one-third of the estate’s value as the spousal gift instead of what you provided in your will. You may want to discuss this further with your attorney.}

**PRIMARY BENEFICIARIES:** Whom do you want to receive all (or the majority) of your estate?

My spouse, if he/she survives me, and if not, then my children \_\_\_\_\_

Other: List by name, relationship (i.e. brother, friend, etc.) and the percent they are to receive.

NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ SHARE \_\_\_\_\_ %

If any of the above beneficiaries die before you and leave descendants (children/issue), do you want the share of the deceased beneficiary to pass to their issue, or to pass only to the beneficiaries you named above? (For example if one of your children dies before you and leaves children, do you want the share of deceased child to pass to his children (your grandchildren) or to go only to your surviving children?)

To the children of any deceased beneficiary \_\_\_\_\_

Only to the named beneficiaries listed above \_\_\_\_\_

**SECONDARY BENEFICIARIES:** If all of the primary beneficiaries you designated predecease you or die within 30 days of you, to whom do you wish to leave your estate (provide name, relationship, and percentage of inheritance or list of which item(s) are to go to which individuals)?

NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ SHARE \_\_\_\_\_ %

**ADVANCE MEDICAL DIRECTIVE/”LIVING WILL”:** An advance medical directive or “living will” is separate from your will, but may be an important part of your estate plan. It states that in the event you have a terminal, incurable medical condition and your life is only being prolonged by means of artificially provided life support, and if you cannot communicate your desires, the living will “speaks for you” so your doctors know and can act upon, your desires about medical life support. The conditions that trigger your living will, and the extent of the medical care to be withdrawn, vary under state law. Your legal assistance attorney can help you decide which State(s) forms to prepare. Once executed, the document is effective until you revoke it, which you may do at any time by physically destroying it, or in an emergency, by telling someone who can testify that you did in fact revoke it.

Do you want a living will? Y\_\_\_\_\_ or N\_\_\_\_\_

**SPECIAL POWER OF ATTORNEY FOR HEALTH CARE:** Another important document is a special power attorney for health care. You may execute this in addition to or instead of a living will. It appoints someone you name to make medical care decisions for you if you cannot make your own medical decisions. It applies to more situations than the living will, which addresses only continued life support if you have a terminal condition. The power of attorney for medical care gives the person you name as your agent the authority to make a wide range of medical decisions on your behalf. It also gives your agent access to your medical information and authority to fully participate with your treating physicians in deciding the care you receive. Obviously, the person you designate to be your agent should be someone you trust with life and death decisions. Like your living will, the power of attorney is usually drafted in accordance with the laws of the state where you reside.

Do you want a Health care power of attorney? Y\_\_\_\_\_ or N\_\_\_\_\_

Primary Person for health care decisions: Name\_\_\_\_\_

Address: \_\_\_\_\_ Phone\_\_\_\_\_

Alternate: Name\_\_\_\_\_

Address: \_\_\_\_\_ Phone\_\_\_\_\_

Do you wish to specify that you desire to donate your body organs for transplant upon death? Y\_\_\_\_\_ or N\_\_\_\_\_

If yes, are you also willing to donate organs and tissue for medical, educational, or scientific purposes? Y\_\_\_\_\_ or N\_\_\_\_\_

Do you wish to specify that, if possible and if it does not place an undue burden upon your family that you prefer to die at home rather than in a hospital? Y\_\_\_\_\_ or N\_\_\_\_\_

**SPRINGING DURABLE GENERAL POWER OF ATTORNEY:** Your will enable you to dispose of your property as you wish after you die. While you are living, you have the right to decide what happens to that property as long as you are of sound mind. But if you become incapacitated, and cannot handle your own affairs, a court order may revoke your right to manage your own money/property and appoint a guardian or conservator. To protect you from this, you may appoint an agent through a power of attorney. A power of attorney is your written authorization for someone to act on your behalf, for whatever purpose you designate. Ordinarily, a power of attorney expires if you become mentally disabled- the time you need help the most. A springing power of durable power of attorney can take effect when you become unable to manage your own personal and financial affairs and will last as long as you are alive or until you revoke it. As long as you are mentally competent, you can revoke a durable power of attorney whenever you like simply by destroying the document. If you choose to have a springing durable general power of attorney, remember to name someone you trust as your attorney-in-fact. Your agent will have great authority over your affairs. Not only can they keep your affairs in order, but they have the potential to abuse the document at your expense.

Would you like a springing durable general power of attorney? Y\_\_\_\_\_ or N\_\_\_\_\_

Primary Person for Financial Decisions: Name:\_\_\_\_\_

Address\_\_\_\_\_ Phone\_\_\_\_\_

Alternate: Name:\_\_\_\_\_

Address: \_\_\_\_\_ Phone\_\_\_\_\_

