



Wanda I. Smith, JD, FGC ^(SM)
Attorney & Forensic Genealogist
PO Box 126
Prosper, Texas 75078
Voice: 972-836-9091
Fax: 972-596-5159
wandasmithlaw@gmail.com
www.WandaSmithLaw.com

Wills ~ Trusts ~ Estate Planning ~ Guardianship ~ Probate

WILL INFORMATION SHEET FOR PROSPECTIVE CLIENTS

Instructions: Please complete as much of this form as you can before the initial consultation. If it is taking you longer than 15 minutes, just stop and bring the partially completed form with you to the consultation and we'll complete the information together. Ignore any sections that do not pertain to your situation.

The basic Will packet (\$1000 for a married couple or \$600 for a single person) contains the following documents:

1. Will
2. Memorandum on Personal Belongings
3. Medical Power of Attorney
4. Directive to Physicians, Family and Surrogates (Living Will),
5. HIPPA Release, and a
6. Statutory Durable Power of Attorney (for financial affairs.)

If you need to use my office for the Will signing and I provide the witnesses, there is an additional \$30 fee. Complete as much of the form as you can before the consultation. You may also scan the complete form and email it to me before the consultation if you wish.

On the last two pages are listed additional legal documents you may want to consider in addition to the basic Will packet. Information regarding each document and the additional fee is included. Please mark any of these additional interested if you are interested in discussing any of these additional documents at the time of your consultation.

INFORMATION FOR WILL

1. **Spouse No. 1: Statement of Identity:** This section of the Will is to fully identify you to the public and to the court so there is no confusion between you and any other person with a similar name and birth date. It also establishes the relationship between you and others who may be named later in the Will. Where possible include the county if known.
2. Your full name (include full middle name):
3. Nickname (what should I call you?):
4. How do you typically sign your legal documents:
5. Street Address:
6. City, State, Zip:
7. Email address:
8. Phone Number:
9. Your birth date:
10. Last 3 numbers of your social security number:

11. Last 3 numbers of your driver's license (and state):
12. Place of birth (city, county, state):
13. Any prior spouses?
 - a. Name
 - b. Reason for termination of marriage (death/divorce, etc.)
 - c. Place and Date of termination
 - d. Name
 - e. Reason for termination of marriage (death/divorce, etc.)
 - f. Place and Date of termination
14. Is everything you own community property? Yes/No
 - a. If No, please list property that is your separate property on the back of this page.
15. Are you leaving everything to your spouse? Yes/No
 - a. If No, write your wishes on the back of this page.
16. If your spouse dies first are you leaving everything equally to your children? Yes/No
 - a. If No, write your wishes on the back of this page.

17. Spouse No. 2: Statement of Identity:

18. Your full name (include full middle name):
19. Nickname (what should I call you?):
20. How do you typically sign your legal documents:
21. Street Address: same as spouse? Yes/No
22. City, State, Zip:
23. Email address:
24. Phone Number:
25. Your birth date:
26. Last 3 numbers of your social security number:
27. Last 3 numbers of your driver's license (and state):
28. Place of birth (city, county, state):
29. Any prior spouses?
 - a. Name
 - b. Reason for termination of marriage (death/divorce, etc.)
 - c. Place and Date of termination
 - d. Name
 - e. Reason for termination of marriage (death/divorce, etc.)
 - f. Place and Date of termination
30. Is everything you own community property? Yes/No
 - a. If No, please list property that is your separate property on the back of this page.
31. Are you leaving everything to your spouse? Yes/No
 - a. If No, write your wishes on the back of this page.
32. If your spouse dies first are you leaving everything equally to your children? Yes/No
 - a. If No, write your wishes on the back of this page.

Information About Children Born to Husband and Wife

- 1. Child #1 name (include full middle name):**
 - a. Street Address:
 - b. City, State, Zip:

- c. Email address:
- d. Phone Number:
- e. Birth date:
- f. Spouse:
- g. Names and birth dates of children (your grandchildren):
 - i. Name:
 - ii. Birthdate:
 - iii. Name:
 - iv. Birthdate:
 - v. Name:
 - vi. Birthdate:

2. Child #2 name (include full middle name):

- a. Street Address:
- b. City, State, Zip:
- c. Email address:
- d. Phone Number:
- e. Birth date:
- f. Spouse:
- g. Names and birth dates of children (your grandchildren):
 - i. Name:
 - ii. Birthdate:
 - iii. Name:
 - iv. Birthdate:
 - v. Name:
 - vi. Birthdate:

If there are additional children, write their information on the back of this page.

Are there children from prior marriages? Yes/No
 If yes, list their information on the back of this page and indicate who was their parent.

Attach additional sheets or write on the back of this page if additional room is needed.

Appointment of Executor

1. Who do you want to name as the Executor of your Will? You may list more than one person if you want two people to be co-executors, but more than two usually complicates matters. Provide their full name, address and phone number if not listed above. Note your executor cannot be a convicted of a felony or crime of moral turpitude.
 1. Name
 2. Relationship to you
 3. Address
 4. City, State, Zip
 5. Phone number
2. Who do you want to name as alternate Executor? Please list at least one, preferably two alternate executors and provide their names, addresses and phone numbers if not listed above.
 - a. First alternate
 1. Name
 2. Relationship to you
 3. Address

4. City, State, Zip
 5. Phone number
- b. Second alternate
 6. Name
 7. Relationship to you
 8. Address
 9. City, State, Zip
 10. Phone number

Appointment of Trustee

3. Who do you want to name as the Trustee of any trust that is created for an incapacitated or minor person who is a beneficiary of this will? Usually it is the parent or guardian of the person. Provide their full name, address and phone number if not listed above.
 1. Name
 2. Relationship to you
 3. Address
 4. City, State, Zip
 5. Phone number

4. Who do you want to name as alternate Trustee(s)? Provide their full name, address and phone number if not listed above.
 - a. First alternate
 11. Name
 12. Relationship to you
 13. Address
 14. City, State, Zip
 15. Phone number
 - b. Second alternate
 16. Name
 17. Relationship to you
 18. Address
 19. City, State, Zip
 20. Phone number

Bequests

Instead of listing out specific bequests of personal items to different people, I recommend using a Memorandum of Personal Belongings. This is a document mentioned in the Will, but it does not become part of the public record like the contents of the Will. Specific bequests can be written in the Memorandum at any time after the execution of your Will. For gifts of money or real property, list your beneficiaries.

Witnesses

In Texas, two witnesses are required. They do not read your will or know the content of the will. They only witness that they saw you sign it. I will prepare a self-proving affidavit which is a notarized statement signed by the Witnesses so that they do not have to appear in court. Your witnesses cannot be beneficiaries in the Will or related to you by blood or marriage. They should be disinterested third parties – a friend or neighbor is acceptable. In order to keep my fees as low as

possible, there is an additional \$30 fee if the Will signing and witnesses are provided at my office. There is no additional fee if you provide the witnesses and the Will signing is at your home or office.

Witness #1 Name:
Street Address:
City, State, Zip:
Phone number:

Witness #2 Name:
Street Address:
City, State, Zip:
Phone number:

POWER OF ATTORNEY DOCUMENTS

Along with your will, and the Memorandum on Personal Belongings mentioned above, I will also draft the following documents as part of your basic Will packet:

1. A **Medical Power of Attorney Designation of Health-Care Agent** is a document in which you name an agent to make medical decisions for you if you are unable to make your own decisions. I recommend naming a primary agent and at least one alternate agent, preferable two alternates. This document incorporates a HIPPA release so that your agent can access your medical history and insurance information in order to make better decisions for you.
 - a. Please list your primary agent. If you have provided this information elsewhere, just list name.
 - i. Name
 - ii. Relationship to you
 - iii. Address
 - iv. City, State, Zip
 - v. Phone number
 - b. Please list two alternate agents:
 - i. First alternate
 - a. Name
 - b. Relationship to you
 - c. Address
 - d. City, State, Zip
 - e. Phone number
 - ii. Second alternate
 - f. Name
 - g. Relationship to you
 - h. Address
 - i. City, State, Zip
 - j. Phone number
2. **Directive to Physicians and Family or Surrogates** (often referred to as a **Living Will**) is a document where you state your wishes if you are unable to make your own medical decisions. This addresses two specific conditions of when you might have either a :
 - i. irreversible condition, (such as Alzheimer's, Parkinson's, etc.)

- ii. terminal condition (less than six months life expectancy)
 - b. On each selection you'll select whether you want extraordinary measures to be undertaken to keep you alive, or whether you just want to be kept as comfortable as possible.
 - c. You may write additional information on these pages as instructions to your family and physicians. Typically you would list the same agents as you name on the Medical Power of Attorney.
- 3. **HIPPA Release.** This allows your named agents to have access to your medical history and insurance information.
- 4. **Statutory Durable Power of Attorney:** You will need to select an agent and alternate persons who will have power of attorney over your financial assets. This should be a person you trust completely. You may select to give your agent only some of the powers listed in this document, or all of the powers.
 - a. **Who do you want to appoint to have the power have access to your financial assets and take care of your financial affairs?** Your funds can only be spent to take care of you during your lifetime. Please provide their full name, address, and phone number.
 - i. Name of primary agent:
 - ii. Relationship to you
 - iii. Address
 - iv. City, State, Zip
 - v. Phone number
 - b. Please list two alternate agents:
 - iii. First alternate
 - k. Name
 - l. Relationship to you
 - m. Address
 - n. City, State, Zip
 - o. Phone number
 - iv. Second alternate
 - p. Name
 - q. Relationship to you
 - r. Address
 - s. City, State, Zip
 - t. Phone number

ADDITIONAL DOCUMENTS YOU SHOULD CONSIDER

These documents are not part of the basic will packet but you should review whether any of them might be needed for your specific situation. We can discuss any questions you may have about these during the Will consultation. A number of these documents require two witnesses and a notary so they can be conveniently executed if done at the same time as your Will. Place a mark beside any of these that you'd like to discuss during your consultation.

1. **Special Durable Power of Attorney for Real Estate Transactions.** If you own real property and anticipate that your agent will need to handle real estate transactions for you during your lifetime (not under the Will), it is recommended that you add this form to the packet of other documents being created. As an add on to your basic Will packet the fee for this document is an additional \$50 per person.
2. **Appointment for Disposition of Remains.** A recent Texas Supreme Court case has caused funeral homes to be unwilling to cremate remains without getting written approvals from every person who could sue them. If you plan to be cremated, all of your immediate relatives would be asked to sign approval documents with the funeral home, even if you have stated in your Will or in other documents that you wish to be cremated. This document lets you designate one person (and alternates) as your agent and the funeral home is not liable to other family members. As an add on to your basic Will packet the fee for this document is an additional \$50 per person.
3. **Designation of Guardian in Event of Later Incapacity.** Sometimes, even with valid power of attorney documents in place, some family member or other person, might apply to be appointed your guardian. In this document you designate who you want to serve as your guardian should one need to be appointed. You can also use this document to disqualify specific persons from serving as your guardian. As an add on to your basic Will packet the fee for this document is an additional \$50 per person.
4. **Declaration for Mental Health Treatment.** This document allows you to make medical decisions in advance in regard to three specific mental health treatments: psychoactive medication (drugs that alter mood, consciousness, cognition or behavior), convulsive therapy (electroshock therapy), and emergency mental health treatment. If you are at risk for diseases such as **Alzheimer's** or **Parkinson's** where people sometimes suffer from hallucinations, delusions or paranoia, you may want to consider having this document in place before someone decides treatment for you that you don't want to have. This document also lets you select whether, in an emergency situation, do you prefer the use of Restraint, Seclusion or Medication and whether you prefer a male or female to administer the treatment. This document is valid for three years unless you are incapacitated at the time of expiration in which case it will continue until the incapacity terminates. As an add on to your basic Will packet the fee for this document is an additional \$50 per person.
5. **Out-of-Hospital Do-Not-Resuscitate Form.** If you are very elderly or are terminally ill or have an irreversible condition you may want to consider having this document in place. If anyone calls an ambulance for you in an emergency the Emergency Medical Technicians (EMTs) are required by law to resuscitate you. If you do not want that to occur, this form must be in a conspicuous place in your home, or you can order a bracelet to wear after execution of this form. For more information on **approved** bracelet manufacturers, see: <https://www.dshs.texas.gov/emstraumasystems/dnr.shtm#form> The OOH-DNR form is available for free on the above website and free to download from my website also. However, it requires preparation, two witnesses and a notary. As an add on to your basic Will packet the fee for this document is an additional \$50 per person.

OTHER ESTATE PLANNING DOCUMENTS YOU SHOULD CONSIDER

1. **Enhanced Life Estate Deed.** This deed allows you to transfer your home to a named beneficiary, but retain a life estate and stay in your home during your life. There are property tax advantages and Medicaid advantages to using this instead of outright gifting

your home to someone. My fee to draft this document is \$300, plus the county clerk's recording fee (usually \$30).

2. **Revocable Transfer on Death Deed.** This deed will convey your property to a named beneficiary or beneficiaries immediately upon your death without going through probate. It must be recorded in the county deed records. It is entirely revocable during your lifetime and since it has no effect until your death you can still sell or refinance the property at any time. After your death your named beneficiary need only file an Affidavit in the county deed records establishing the facts of your death. My fee to draft this document is \$300, plus the county clerk's recording fee (usually \$30).

FREE ESTATE PLANNING DOCUMENTS YOU SHOULD CONSIDER

3. **Texas Department of Motor Vehicles Form VTR-121. Beneficiary Designation for Motor Vehicle Form.** You can download this form from my website on the Forms page in the "Other Information and Forms" section. Instructions are on the form. Your vehicle will not pass through probate if you complete this form and follow the instructions about filing.
4. **Texas Department of Motor Vehicles Form VTR-122. Right of Survivorship for Motor Vehicle Form.** You can download this form from my website on the Forms page in the "Other Information and Forms" section. Instructions are on the form. Your vehicle will not pass through probate if you complete this form and follow the instructions about filing.

After completion of all information on pages 1-6, you can either scan and return it to me via email to wandasmithlaw@gmail.com, or bring it to your consultation. If you have any questions while completing the form, please call me at 972-836-9091.

Along with this form, be sure to download and read the **Engagement Letter** and be prepared to sign it at the consultation and pay a retainer of ½ (one half) of the fees when we meet. The balance will be due at the time of the execution of the documents.