

Questionnaire for Simple Will

YOU

Full name: _____

Social Security Number: _____

Date of birth: _____

SPOUSE

Full name: _____

Social Security Number: _____

Date of birth: _____

CHILDREN (name, address, age)

1. _____

2. _____

3. _____

4. _____

Addresses: _____

What should happen to your home when you pass away? _____

Do you have a survivorship deed? Transfer on death deed or Affidavit? _____

Do you own your home? How many homes do you own? _____

Executor(s) (Must be over 18 years of age)

Name of 1st Executor (name): _____

Name of 2nd Executor (name): _____

Name of 3rd Executor (name): _____

Beneficiaries and what they receive (amounts, percentages, specific property):

1. _____

2. _____

3. _____

4. _____

Name someone you want to name to NOT receive any property: _____

Do you currently have a Will? Trust? _____

Specific bequests of personal property (i.e. money, jewelry, cars, art, etc.)

