

**NOTES FOR WILL PREPARATION**

Interviewed \_\_\_\_\_ Signing \_\_\_\_\_

**INFORMATION**

**Client's Name:** \_\_\_\_\_ **SSN:** \_\_\_\_\_ **DOB:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Home Phone:** ( ) \_\_\_\_\_ **Cellphone:** ( ) \_\_\_\_\_ **Pager:** ( ) \_\_\_\_\_

**Contact NOT living with client:** \_\_\_\_\_  
Name Phone

**Employer:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone:** ( ) \_\_\_\_\_ **Ext.** \_\_\_\_\_ **Fax:** ( ) \_\_\_\_\_

**Marital Status:** \_\_\_\_\_

**Spouse's Name:** \_\_\_\_\_ **SSN:** \_\_\_\_\_ **DOB:** \_\_\_\_\_

**Home Phone:** ( ) \_\_\_\_\_ **Cellphone:** ( ) \_\_\_\_\_ **Pager:** ( ) \_\_\_\_\_

**Employer:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone:** ( ) \_\_\_\_\_ **Ext.** \_\_\_\_\_ **Fax:** ( ) \_\_\_\_\_

**POWER OF ATTORNEY**

**CLIENT:** Health to: \_\_\_\_\_ From: \_\_\_\_\_

Property to: \_\_\_\_\_ From: \_\_\_\_\_

Property address: \_\_\_\_\_ From: \_\_\_\_\_

**SPOUSE:** Health to: \_\_\_\_\_ From: \_\_\_\_\_

Property to: \_\_\_\_\_ From: \_\_\_\_\_

Property address: \_\_\_\_\_ From: \_\_\_\_\_

**CLIENT's Executor:** \_\_\_\_\_ **Successor:** \_\_\_\_\_

**SPOUSE's Executor:** \_\_\_\_\_ **Successor:** \_\_\_\_\_

**CHILDREN:**

1)

Name	Address	DOB
Spouse: _____		
Children: _____		
_____		
_____		

2)

Name	Address	DOB
Spouse: _____		
Children: _____		
_____		
_____		

3)

Name	Address	DOB
Spouse: _____		
Children: _____		
_____		
_____		

4)

Name	Address	DOB
Spouse: _____		
Children: _____		
_____		
_____		

5)

	Name	Address	DOB
Spouse:			
Children:		Address	DOB

**HEIRS/LEGATEES (If no Spouse or Children)**

Name	Address	Relation

**WILL PROVISIONS**

**CLIENT:**

**Personal Property to:** \_\_\_\_\_  
 \_\_\_\_\_ **per** \_\_\_\_\_

**If deceased, then to:** \_\_\_\_\_  
 \_\_\_\_\_ **per** \_\_\_\_\_

**SPOUSE:**

**Personal Property to:** \_\_\_\_\_  
 \_\_\_\_\_ **per** \_\_\_\_\_

**If deceased, then to:** \_\_\_\_\_  
 \_\_\_\_\_ **per** \_\_\_\_\_

**Miscellaneous Other**

\_\_\_\_\_  
 \_\_\_\_\_

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**SPECIFIC BEQUESTS**

**Client:**

**Item (Describe fully)**

**To:**

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**Spouse:**

**Item (Describe fully)**

**To:**

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**FUNERAL ARRANGEMENTS**

**Wake:** \_\_\_\_\_

**Burial**

**Cremation**

**Cemetery:** \_\_\_\_\_

**Other Wishes:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PROPERTY/ASSETS**

**Bank Account:**

<b>Bank</b>	<b>Account #:</b>	<b>Title in</b>
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**Stocks:**

<b>Company</b>	<b>Shares</b>	<b>Title in</b>
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<b>Bonds</b>	<b>Value</b>	<b>Title in</b>
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<b>Pension/Profit Sharing</b>	<b>Amount Vested</b>	<b>Title in</b>
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<b>Life Insurance/Policy #</b>	<b>Insured</b>	<b>Beneficiary</b>
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**Mortgages**

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**Real Estate**

<b>Address</b>	<b>Value</b>	<b>Title in</b>

**Other Property/Assets** (*Furniture, Vehicles, Jewelry, etc.*)

Item	Location	Value	Client's/Spouse's
			<b>C / S</b>
			<b>C / S</b>
			<b>C / S</b>
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			<b>C / S</b>

**Other Notes:**

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