

Single Client Will Worksheet

I. Name and Address of Testator:

II. Name and Address of Spouse or Life Partner (if any) _____

III. Names and Addresses of Children (natural and adopted) _____

IV. Documents to be Created

Yes

No

- Will

- General P of A

- Health Care Directive

- Revocation of Existing Trust

- Deed Severing Joint Tenancy

V. General Questions:

1. Who would you like to serve as your Personal Representative (Executor)?

2. What is this person's relationship to the Testator?

3. Address of Personal Representative _____

4. Is there specific personal property you would like distributed?

a. Gifts of cash? If so, to whom? _____

b. Gifts to charity? _____

c. Any other gifts?

5. Do you have real estate to distribute? How Titled?

6. Is there a mortgage balance? _____

7. How is the real estate to be distributed? _____

8. Are there bank accounts or shares of stock to be distributed?

9. How are these held? Are any POD accounts to pass outside of the will document? (POD means Pay on Death). Some bank accounts have a beneficiary named so the money goes straight to them.

9. Is there a family member to be disinherited? _____
