

Will information Form

Full Name: _____

Maiden Name: _____

Changes of Name: _____

Assumed Names: _____

Date of Birth: _____ SSN: _____

Place of Birth: _____

Residence: _____

Mailing Address: _____

Home Phone: _____ Mobile Phone: _____

Name of Spouse / Partner: _____

Date of Birth for Spouse / Partner: _____ SSN: _____

Times married: You _____ Spouse / Partner _____

If ever divorced: Date: _____ City: _____, State _____.

Name of Former Spouse: _____

Former Spouse's Date of Birth: _____

Date and Place of Divorce and annulments, if any: _____

Name of Father: _____

Father's Address: _____

Father's Date of Birth: _____

Name of Mother: _____

Mother's Address: _____

Mother's Date of Birth: _____

Names of Children	Addresses	Children's Birth Date & Place of Birth
_____	_____	_____
_____	_____	_____
_____	_____	_____

Express disinheritance of children? _____

If so, who? _____

Names of Any Desired Beneficiaries Other than Spouse / Partner or Child	Addresses	Relationship	Amount of Bequest
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Property of Testator

Real Estate Type	If in Joint Tenancy, so State	Location	Title in Name of	Estimated Value
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Bank Accounts	If in Joint Tenancy, so State	Standing in Name of
_____	_____	_____
_____	_____	_____
_____	_____	_____

Securities, Description (if in Joint Tenancy, so state)	Issued in Name of	Market Value
_____	_____	_____
_____	_____	_____
_____	_____	_____

My safe deposit box is at: _____.

The key for the safe deposit box is at: _____.

Joint tenant is: _____.

Life Insurance, Annuities, & Endowments

Company	Policy No.	Kind	Present Beneficiaries and Relationship	Face Value
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Other Assets	Description	Title in Name of	Value
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

If you wish any special disposition of a specific item of tangible personalty [*usually this is not desired*], such as furniture, furnishings, household equipment, car, jewelry, watch, furs, stamp collection, tools, etc., indicate below:

Item	Name and Address of Beneficiary

Burial, Funeral, Disposal of Body

Burial and funeral directions: I direct that my funeral be conducted _____

[specify, such as: according to the rites of the ___ church] by _____ at

_____, _____ [city], _____

County, _____ [state]. I direct that my body be buried in _____

[my lot or my family plot or as the case may be] in the _____

Cemetery at _____

[address], _____ [city], _____

County, _____ [state]. I direct that the total cost of my funeral, burial, gravestone is not to

exceed \$ _____.

Executors

Name of Executor: _____

Executor's Address: _____

Successor Executor: _____

Successor Executor's Address: _____

Guardians of Minors

Name of Guardian: _____
Guardian's Address: _____
Relationship to Testator: _____
Successor Guardian: _____
Successor Guardian's Address: _____

Execution of Will

Time and Place for Execution: _____

Witness #1 Name: _____
Witness # 1 Address: _____
Witness #2 Name: _____
Witness # 2 Address: _____