



**CHILDREN:**

I must know each and *every child* that you have had born to you during your life, even if you do not want to leave them anything in your will. Your “children” includes any natural born child (blood) and any legally adopted children. If you have raised a child and have treated them as your own, I need to know that as well. If your spouse has children from another relationship and you would like to include them in your will, be sure and list them and state that they are your spouse’s children.

How many children do you have with your spouse? \_\_\_\_\_

How many other children do you have? \_\_\_\_\_

How many other children does your spouse have? \_\_\_\_\_

- 1. Name: \_\_\_\_\_ Over 18?  Yes  No Age: \_\_\_\_\_  
 Male  Female  Natural (Blood)  Adopted  Other: \_\_\_\_\_
- 2. Name: \_\_\_\_\_ Over 18?  Yes  No Age: \_\_\_\_\_  
 Male  Female  Natural (Blood)  Adopted  Other: \_\_\_\_\_
- 3. Name: \_\_\_\_\_ Over 18?  Yes  No Age: \_\_\_\_\_  
 Male  Female  Natural (Blood)  Adopted  Other: \_\_\_\_\_
- 4. Name: \_\_\_\_\_ Over 18?  Yes  No Age: \_\_\_\_\_  
 Male  Female  Natural (Blood)  Adopted  Other: \_\_\_\_\_
- 5. Name: \_\_\_\_\_ Over 18?  Yes  No Age: \_\_\_\_\_  
 Male  Female  Natural (Blood)  Adopted  Other: \_\_\_\_\_

**SECTION 2: DISTRIBUTION OF ASSETS**

Generally speaking, how would you like your property distributed?

**Examples:**

*(Note that these are just examples. You can divide your estate in any manner you choose).*

**Married with Children only of Husband & Wife:**

- All to your spouse, then divide equally among your children if your spouse dies before you; or
- 1/2 to your spouse and 1/2 to your children; or
- All to your spouse and nothing to your children; or
- Other: \_\_\_\_\_

**Married with Children of Husband & Wife (i.e. children from another relationship):**

- All to your spouse, then divide equally among your children and your spouse’s children if your spouse dies before you; or
- 1/2 to your spouse and 1/2 to your children and your spouse’s children; or
- All to your spouse and nothing to your children; or
- Other: \_\_\_\_\_

**Married with No Children:**

- All to your spouse; or
- 1/2 to your spouse and 1/2 to \_\_\_\_\_; or
- Other: \_\_\_\_\_

**Children but No Spouse:**

- All to your children in equal shares; or
- 1/2 to your children and 1/2 to \_\_\_\_\_; or
- Other: \_\_\_\_\_

**Other:**

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**SPECIAL BEQUESTS:**

Below, please list any special bequests (i.e. "I want to leave my truck to my oldest son, John.").

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<b>SECTION 3: TRUSTS</b>
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If you have minors who are entitled to receive all or part of your estate, I strongly recommend creating a trust in your will where the funds will be managed and distributed by a trustee until a certain age. A trust can be created for any person entitled to receive your estate, regardless of age. Therefore, if you have a beneficiary who is disabled or may waste the money, you may want to consider a trust for that person as well.

1. Do you want to create a trust for any of your beneficiaries?  Yes  No
2. If "Yes", for whom do you want to create a trust?  
(Check all that apply.)
  - Any minor beneficiary
  - Any person under the age of \_\_\_\_\_
  - Disabled person(s)  
Name: \_\_\_\_\_
  - Other person(s)  
Name: \_\_\_\_\_
3. The trust can terminate and fully distribute whenever you choose or can last for the beneficiaries' lifetime. It can also be distributed over time (i.e. 25% at age 22, 25% at age 25, remainder at age 30). When do you want the trust to terminate?
  - At age \_\_\_\_\_
  - \_\_\_\_\_% at age \_\_\_\_\_, then \_\_\_\_\_% at age \_\_\_\_\_, then \_\_\_\_\_% at age \_\_\_\_\_
  - Lifetime, then to next generation at age \_\_\_\_\_
  - Other: \_\_\_\_\_





If "Yes", please indicate what type of care you would like to receive under each of the following conditions:

**Terminal Condition:** If, in the judgment of my physician, I am suffering with a terminal condition from which I am expected to die within six months, even with available life-sustaining treatment provided in accordance with prevailing standards of medical care:

- A.        \_\_\_\_\_        I request that all treatments other than those needed to keep me as comfortable be discontinued or withheld and my physician allow me to die as gently as possible; OR
  
- B.        \_\_\_\_\_        I request that I be kept alive in this terminal condition using available life-sustaining treatment. (THIS SELECTION DOES NOT APPLY TO HOSPICE CARE.)

**Irreversible Condition:** If, in the judgment of my physician, I am suffering with an irreversible condition so that I cannot care for myself or make decisions for myself and am expected to die without life-sustaining treatment provided in accordance with prevailing standards of care:

- C.        \_\_\_\_\_        I request that all treatments other than those needed to keep me comfortable be discontinued or withheld and my physician allow me to die as gently as possible; OR
  
- D.        \_\_\_\_\_        I request that I be kept alive in this irreversible condition using available life-sustaining treatment. (THIS SELECTION DOES NOT APPLY TO HOSPICE CARE.)

Special Notes or Instructions:

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If you have any questions, please do not hesitate to call us at 214.423.5101.