

WILL QUESTIONNAIRE

SIMPLE WILL _____ TRUST _____

***PLEASE BE SURE TO INDICATE IF ANY BENEFICIARIES ARE UNDER THE AGE OF 18**

FULL LEGAL NAME(S)

GUARDIANSHIP OF MINOR CHILDREN

ADDRESS

SPECIAL BEQUESTS

COUNTY

DISTRIBUTION OF TRUST FUNDS

EXECUTOR

DIVISION OF ESTATE

CO-EXECUTOR(S)

SUCCESSOR EXECUTOR(S)

PROVISIONS NOT PREVIOUSLY MENTIONED

TRUSTEE(S)

NOTES: _____

SUCCESSOR TRUSTEE(S)

BENEFICIARY(S) (CITY, STATE, AGE*)
