WILL WORKSHEET

PRIVACY ACT STATEMENT
1. AUTHORITY: 10 USC 8072
2. PRINCIPAL PURPOSE: To collect data to enable the preparation of your will and other documents.
3. ROUTINE USES: Used by the legal assistance attorney to prepare the documents.
4. DISCLOSURE: You are not required to use this worksheet. However, we cannot assist you without the requested information.

This information is subject attorney-client privilege and may not be released without your consent.
Please be very careful to provide complete and correct spelling for each name provided.

CLIENT INFORMATION

Full Name (First Middle Last):_____
Current Street Address: _____
Rank: _____ Branch: _____ SSN (Last 4): _____ US Citizen: ◯ YES ◯ NO
Do you have a prior will or estate plan? ◯ YES ◯ NO
Email: _____
What is your duty status? ◯ ACTIVE DUTY ◯ RETIRED ◯ RESERVE ◯ NATIONAL GUARD ◯ CIVILIAN

STATE OF DOMICILE

Domicile State (State of Legal Residence) this is the place where you have your permanent home, to where, whenever you are absent, you have the intention of returning.

Which state are/do you:
Registered to vote:____ Licensed to drive:_____ Pay income tax:_____ Own real estate: _____

CURRENT TRUSTS

Are there any trusts (NOT in any will), such as living trusts, already established for the benefit of yourself, any family members or other beneficiaries? ◯ **Yes** ◯ **No**

***If you already have established such a trust or are the beneficiary of an already-established trust, our office cannot draft a will for you as this is outside the scope of the Army Legal Assistance program. You will need to see an estate-planning attorney who can draft a will for you that incorporates these advanced estate-planning concepts. ***

MARITAL STATUS

◯ Married once, and my spouse is alive
◯ Married and spouse is alive, but was married before (prior spouse died or was divorced)
◯ Widow/Widower
◯ Previously married, but now divorced and single
◯ Single, never married
◯ Separated getting divorced
◯ Party to a ◯ same-sex marriage ◯ domestic partnership ◯ civil union

Current spouse's information **(IF MARRIED)**:
Name (First Middle Last): _____ SSN (last 4): _____
Current Address (if different): _____
U.S. Citizen? ◯ Yes ◯ No Resident Alien? ◯ Yes ◯ No

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CHILDREN

Do you have any children? ○ YES ○ NO
If yes, are any children under 18? ○ YES ○ NO
Are you expecting a child? ○ YES ○ NO

Please list your children:

Full Name (first middle last)	Age	Male/Female	Natural/Adopted/Step

Is any biological child from a previous relationship? ○ YES ○ NO
Does any child have special needs? ○ YES ○ NO
If you have adopted children, are they treated the same as your natural children? ○YES ○NO
If you have step children, do you wish to treat them the same as your natural children? ○ YES ○ NO

ESTATE VALUE

To determine what type of will is appropriate for you, we need an estimate of the value of your estate. For this purpose, include the value of all of the property you own in your name, and if married, the value of your spouse's property. If any of your property secures a debt (for example, a mortgage on your home), include only your equity in the property. Also include the value of your life insurance policies (SGLI, VGLI, etc.) below. Please note that life insurance ordinarily does not pass according to your will; it will go to the beneficiaries you designated in the policy.

Approximate value of your estate (not including life insurance): $_____
Value of life insurance (self): $_____

REAL ESTATE

Due to the unique nature of real estate and the way the law of most states treats it, real estate can be singled out and treated separately in a will.

Do you own a family farm/family owned business? ○YES ○ NO
Do you own real estate? ○YES ○ NO
Do you own real estate jointly with your spouse? ○YES ○ NO
Do you own any other real estate? ○YES ○NO

Address: _____

Names on Deed: _____

Address: _____

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Names on Deed: _____

Address: _____

Names on Deed: _____

If yes, how do you wish to give your real estate?

- ○ All to my spouse.
- ○ Just the home to my spouse with all other real estate passing as part of the residuary estate.
- ○ Spouse is to have life estate.
- ○ To pass with the rest of my residuary estate.
- ○ Different properties to different beneficiaries. Please list below each person, their relationship to you, and which property. _____

_____

If your spouse predeceases you, how do you wish to give your real estate?

- ○ To pass with my residuary estate
- ○ To alternate beneficiaries. Please list below each person, their relationship to you, and which property. _____

_____

DISTRIBUTION OF PROPERTY

WHAT CAN I DO WITH MY PROPERTY? You can give your property to anyone you wish, although there are laws in some states which may give your spouse and/or children a right to a portion of your property even if you do not mention them in the will.

CAN I GIVE SPECIFIC THINGS TO SPECIFIC PEOPLE? Yes. You should discuss this with your Legal Assistance attorney. In order to make a specific bequest, you must fully describe what you want to give and the person who is to receive it. You should be careful about specific bequests. If, before your death, you dispose of the property which is subject to a specific bequest, or if there is any doubt about the exact property that you have described in your will, you may create difficulties for your personal representative. Also, keep in mind that if you make a specific bequest, and later decide that you would rather have the property go to another individual, your will would have to be updated unless your state offers a personal property memorandum. Some states, including Florida, allow use of a personal property memorandum to make changes to the disposition of personal property without having to formally execute a new will.

IS ALL OF MY PROPERTY CONTROLLED BY MY WILL WHEN I DIE? No. For example, proceeds of life insurance policies (including SGLI) go to the person you name as the beneficiary on the insurance policy. Additionally, property that is jointly owned with a right of survivorship goes directly to the surviving joint owner. Property passed in this manner avoids the probate process.

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SPECIFIC PROPERTY (OPTIONAL)

Specific gifts of cash or personal property to specific persons and/or charities. These items will be distributed first and may deplete your estate. If no specific gifts are made, all of your property will pass with the rest of your estate as you describe below.

Do you wish to pass specific property separately? ◯ YES (specify below) ◯ NO

SPECIFIC PERSON/CHARITY	RELATIONSHIP	DESCRIPTION OF GIFT

RESIDUARY ESTATE

Your residuary estate is whatever remains after paying debts and expenses and bequeathing specific items.

I want to leave all my property to:

- ◯ My spouse. If my spouse does not outlive me then I want to leave all of my property to my children.
- ◯ One specific beneficiary. (Full name and relationship): _____
- ◯ Specific people to share equally. (List full name and relationships): _____
  _____
- ◯ A group of people described as a class (e.g. "my brothers and sisters"): _____
  _____
- ◯ Some other unequal division between the beneficiaries (e.g. 50% to one beneficiary and 25% each to two others): _____
- ◯ Other (please specify names and relationships): _____
  _____

DISINHERITANCE

You have the right to completely disinherit individuals other than your spouse. Generally, one can only disinherit a spouse to a certain extent; otherwise, the spouse can elect to receive a certain minimum amount the spouse is entitled to under state law.

Is there anyone whom you wish to disinherit (receive nothing from your probate estate under any circumstances)? Please list full name and relationship.

_____

_____

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Minors – Distribution

If **any** of your beneficiaries are minors, how do you want their gifts distributed to them? (Note: Selecting an age greater than 21 will likely require a trust.)

◯ a. I want to give my executor broad power and discretion to decide the best manner to distribute property to minor children.

My executor may establish accounts under the Uniform Gifts to Minors Act or Uniform Transfer to Minors Act; he/she mat establish a trust for the benefit of the children; he/she may distribute money and property to the guardian or custodian of the child for the benefit of the child; and he/she may do other acts as the law will allow to distribute property under my will for the benefit of the children. The child will have access to their portion of my estate upon their 21st birthday or younger, depending on my wishes.

◯ b. I want to establish a TESTAMENTARY TRUST FOR MINOR CHILDREN.

A testamentary trust permits a person of your choosing, called the trustee, to control the property you give to your children in your will. A trust is similar to a bank account that you create for the use of your children; the property you leave to your children automatically goes into the account. The trustee uses the property to benefit the health, welfare and education of your children. If you decide to include a trust, you must choose at least one trustee, but you should name an alternate. You must also choose an age of distribution, which is the age when the children are to receive what is left of the trust. It should be at least 21 years of age.

Minors – Trustee

Complete the following questions only if you wish to include a testamentary trust for your minor children. Please indicate the relationship of the trustee/alternate trustee to you. You cannot name a minor to be either the trustee or alternate trustee. You may appoint different trustees for different children.

Minor's Name	Trustee	Co-Trustee (If desired)	Alternate Trustee (If desired)

MINORS – Age of Distribution

◯ 18
◯ 21
◯ 25 (disfavored - requires express trust)
◯
◉

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MINORS -More than one

If a trust is being established for more than one person (e.g., your children), you can designate whether the trust assets will be held in separate trust for each person or a single trust. One advantage of a single trust is that it can reduce the administrative costs and paperwork associated with managing a trust. However, placing all items in a single trust means that the oldest beneficiary will not receive his or her share of the trust until the youngest beneficiary reaches the age of distribution.

Do you want the trust assets for more than one person to be held in separate trusts for each person, or a single trust?

- ◯ Single Trust
- ◯ Separate trusts for each person

MINORS - Guardianship

A legal guardian is a person who will take custody of your minor children until they reach age 18. Normally, if the other biological or adoptive parent survives you, he or she becomes the children's guardian. However, it is recommended that you name a guardian and an alternate guardian in the event that both you and the other legal parent die. If you or your spouse has children not born of your current marriage, you should discuss the situation in detail with an attorney to determine the most appropriate way to provide for the children.

You may appoint different alternate guardians for different children.

Minor's Name	Guardian	Co-Guardian (If desired)	Alternate Guardian (If desired)

PERSONAL REPRESENTATIVE/EXECUTOR

For Florida the personal representative must be a resident of Florida unless the person is a relative.

Who do you wish to appoint as your personal representative.

- ◯ Spouse
- ◯ Spouse and co-personal representative _____
- ◯ Spouse and successor personal representative _____
- ◯ One personal representative other than spouse _____
- ◯ Two co-personal representatives neither of which is spouse _____
- ◯ One personal representative and a successor personal representative neither of which is your spouse

_____

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LIVING WILL/ADVANCED MEDICAL DIRECTIVE

A living will is a document that allows you to state when certain life sustaining medical procedures should be stopped or continued. Some examples include: respiratory support artificially administered nutrition and hydration , and cardiopulmonary resuscitation. A living will is sometimes referred to as a Do Not Resuscitate *or* DNR. *Often a living will states that life sustaining medical treatment will be stopped if you are in a coma and not expected to recover (persistent vegetative state) or if you have a terminal condition. You may also make other specific wishes known. A living will is only effective if you can no longer communicate your wishes. If you can communicate your desires regarding treatment you are always able to do so no matter what you have said in your living will.*

Do you want a living will valid in the United States? ○YES ○NO

HEALTH CARE/MEDICAL POWER OF ATTORNEY

A Health Care Power of Attorney (HCPOA) *designates an agent who you trust to make medical decisions for you when you are unable to communicate your wishes. An* HCPOA *covers a broader range of circumstances than a living will. Your health care agent will be the dicision maker for all of your health care dicisions, large ot small. If you have a living will, your health care agent will be required to enforce your wishes. If you do not, your agent may be asked to make decisions regaurding starting, continuing, or stopping medical treatment.*

Do you want a Health Care Power of Attorney valid in the U.S.? ○ YES ○ NO

Who would you want to make medical decisions for you if you were unable to make them for yourself?

Name: _____
Relationship: _____
Address: _____
Phone number: _____

Do you want a second agent?

○ No second agent.
○ A second agent and either agent can act separate of the other.
○ A second agent and both must act jointly unless one is incapacitated.
○ A second agent solely to act as a successor if the first agent is incapacitated.

Name: _____
Relationship: _____
Address: _____
Phone number: _____

Do you want your agent to have the authority to donate your organs for transplants? ○YES ○NO
Do you want to include a statement that you prefer to die at home rather than at a hospital? ○YES ○NO
Do you want your agent to also be authorized to handle the disposition of your remains? ○YES ○NO

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FUNERAL ARRANGEMENTS

You may have a strong desire regarding your funeral (for example, burial or cremation). As a practical matter, your funeral may have been carried out by the time your will is read. Finding out after the fact that the arrangements were contrary to your will may cause some dismay for your survivors. Therefore, we recommend that you tell your desires to your next of kin at your earliest opportunity other than in your will, such as in a Letter of Instruction that accompanies your will.

At my death I prefer:

- ◯ To be cremated
- ◯ To be buried at sea
- ◯ To have my body given for medical/scientific purposes (this may result in no body for burial)
- ◯ To be buried at a specified gravesite location. (Please specify):_____
  _____

With full military honors? ◯ YES ◯ NO

DURABLE POWER OF ATTORNEY

This power of attorney allows someone to make personal and financial decisions for you. This power of attorney does not have an expiration date, and is good for the long-term.

Do you want a Durable Power of Attorney? ◯ YES ◯ NO
Do you want the same people listed on the Healthcare Power of Attorney? ◯ YES ◯ NO

If you want someone other than the than the agents for your Healthcare Power of Attorney please complete the following information:

Who would you want to make personal and financial decisions for you if you were unable to make them for yourself?

Name: _____
Relationship: _____
Address: _____
Phone number: _____

Do you want a second agent?

- ◯ No second agent.
- ◯ A second agent and either agent can act separate of the other.
- ◯ A second agent and both must act jointly unless one is incapacitated.
- ◯ A second agent solely to act as a successor if the first agent is incapacitated.

Name: _____
Relationship: _____
Address: _____
Phone number: _____

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OFFICE USE ONLY

Attorney:_____ Date:_____
Services Provided:
☐ Legal Counseling ☐ Notarization ☐ Advanced Medical Directive ☐ Will Prepared with no trust
☐ Legal Research ☐ Will Execution ☐ Power of Attorney and Notary ☐ Will Prepared testamentary trust/guardianship