

THE POCKET LAWYER[®]

Document Preparation Service

/// Workbook ///

✍️ “We Help You Help Yourself” ✍️

LAST WILL AND TESTAMENT



PART “A”

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THE POCKET LAWYER®

Document Preparation Service Workbook

“Self Help” Series

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The **POCKET LAWYER**[®] Document Preparation Service

Last Will and Testament Client Questionnaire

INSTRUCTIONS: Answer All questions with an answer or a N/A. Today's date _____
 If more space is needed, use the space below or attach blank pages.

PERSONAL INFORMATION

1	Husband's first name	Middle	Last
2	Street address		Apt/ Suite
3	City	County	State Zip
4	Mailing Address (<i>if different</i>)		
5	SS#	Date of Birth	
6	Do you have a prior marriage? <input type="checkbox"/> No <input type="checkbox"/> Yes Date married : Date dissolved: State: Children outside of current marriage? <input type="checkbox"/> No <input type="checkbox"/> Yes Name: Age Name: Age Name: Age		
7	Wife's first name	Middle	Last
8	Street address		Apt/ Suite
9	City	County	State Zip
10	Mailing Address (<i>if different</i>)		
11	SS#	Date of Birth	
12	Do you have a prior marriage? <input type="checkbox"/> No <input type="checkbox"/> Yes Date married : Date dissolved: State: Children outside of current marriage? <input type="checkbox"/> No <input type="checkbox"/> Yes Name: Age Name: Age Name: Age		

WILL INFORMATION

13	Are there current Wills for:	a) Husband <input type="checkbox"/> Yes <input type="checkbox"/> No	b) Wife <input type="checkbox"/> Yes <input type="checkbox"/> No
14	If so, where are they located?	a) (H)	b) (W)
Husband's Will Information:			
15	Who do you want to give <u>Specific</u> property to? (beneficiaries)		
16	Name	Address	
17	Property Description		
18	Property Description		
19	Name	Address	
20	Property Description		

Last Will and Testament Client Questionnaire (Continued)	
21	Property Description
	If the above-mentioned beneficiaries predecease you, then to whom? (List in order of preference)
22	1) Name Address
23	Property Description
24	Property Description
25	2) Name Address
26	Property Description
27	Property Description
	Who do you want to give the <u>Remainder</u> of your personal and real property to?
28	1) Name Address
29	What Percent?
30	2) Name Address
31	What Percent?
32	3) Name Address
33	What Percent?
34	4) Name Address
35	What Percent?
	Alternate beneficiaries of the <u>Remainder</u> if one or more of the above predeceases you or declines the bequeath (gift).
36	1) Name Address
37	What Percent?
38	2) Name Address
39	What Percent?
	Who do you want to be your <u>Personal Representative</u> (executor) or joint personal representatives?
40	1) Name Address
41	2) Name Address
	Alternate person(s) if one of the above is unable to serve as your personal representative?
42	1) Name Address
43	2) Name Address

Last Will and Testament Client Questionnaire (Continued)	
56	Property Description
57	Property Description
58	2) Name Address
59	Property Description
60	Property Description
Who do you want to give the <u>Remainder</u> of your personal and real property to?	
61	1) Name Address
62	What Percent?
63	2) Name Address
64	What Percent?
65	3) Name Address
66	What Percent?
67	4) Name Address
68	What Percent?
Alternate beneficiaries of the <u>Remainder</u> if one or more of the above predeceases you or declines the bequeath (gift).	
69	1) Name Address
70	What Percent?
71	2) Name Address
72	What Percent?
Who do you want to be your <u>Personal Representative</u> (executor) or joint personal representatives?	
73	1) Name Address
74	2) Name Address
Alternate person(s) if one of the above is unable to serve as your personal representative?	
75	1) Name Address
76	2) Name Address
Who do you want to be the Guardian or joint guardians of your minor child or children?	
77	1) Name Address

Last Will and Testament Client Questionnaire (Continued)	
78	2) Name Address
Alternate person(s) if one of the above is unable to serve as the guardian of your minor children?	
79	1) Name Address
80	2) Name Address
If additional space is needed, number and insert below.	
ACKNOWLEDGEMENT and SIGNATURE	
81	Do you want us to prepare your Last Will and Testament papers? <input type="checkbox"/> YES <input type="checkbox"/> NO
82	Do you want us to make copies and conform the papers for filing or recording? <input type="checkbox"/> YES <input type="checkbox"/> NO
<u>This Acknowledgement must be signed by each Testator(person) making a Will</u>	
<p>I (We), acknowledge that the information provided by me in this Workbook is true and accurate to the best of my knowledge. I further acknowledge that I am going to do my own last will and testament and want the POCKET LAWYER[®] Document Preparation Service to assist me by performing certain document preparation services, according to my instructions. I will be solely responsible for the information contained in these documents and will have the opportunity to review the completed documents before they are filed, recorded, etc. I understand that the POCKET LAWYER Document Preparation Service does <u>not</u> render legal advice or legal services and is acting solely at my direction and pursuant to my decisions. I further understand that I have the right to handle my own legal matters and act as my own attorney, but that the advice of an attorney may be necessary. The POCKET LAWYER Document Preparation Service encourages attorney participation and will provide a list of attorney referrals, at my request.</p> <p>I hereby relieve the POCKET LAWYER Document Preparation Service from any liability whatsoever, regarding preparation of these documents, and agree to hold them harmless from any damages I may suffer and understand that my sole relief is limited to the return of any fee paid for the preparation of these documents.</p>	
Signature	Date
Print name	
Signature	Date
Print name	
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