DEVAL PATEL LENNON, ESQUIRE ATTORNEY AT LAW

QUESTIONNAIRE TO AID PREPARATION OF YOUR WILL

Section A:		
1. Your Name:		
Birth Date:	Social Security #:	
2. Spouse=s Name:		
Birth Date:	Social Security #:	
3. Your Address:		
4. Telephone #: (Home)	(Work)	
5. United States Citizen: YesNo	(Spouse) Yes	_ No
6. Marriages:		
Date and Place of Cur	rent Marriage:	
Prior Marriage(s):		
Date:	How and when terminated:	
6. Children:		
Name:		Age:
Name:		Age:

Name:	Age:
7. Grandchildren:	
Name:	Age:
Name:	Age:
Name:	Age:
8. Parents:	
(Yours):	
Name:	Living/Deceased
Name:	Living/Deceased
(Your Spouse=s):	
Name:	Living/Deceased
Name:	Living/Deceased
9. Other Living Relatives:	
Name:	Relationship:
Name:	Relationship:
Name:	Relationship:
10. Do you have any existing wills? Yes	s No
11. If your answer to question # 10 is Ayes@,	where is your will located?

Section B:

1. Who would you choose as Executor of your estate, to carry out the wishes of your Will?

Executor: _____

Alternate Executor (in case your first choice cannot act): _____

2. In the event of the death of both you and your spouse, do you want a trustee (selected by you) to manage the funds of your estate and pay over time what is needed for the support and education of your children, until you feel they are old enough to manage the funds themselves? _____Yes ____No

3. If your answer to question # 2 is Ayes@, at what age do you feel the trustee should Aturn over@ control of all funds of your estate to your children?

_____ 21 ____ 22 ____ 25 ____ Other (please specify age)

4. If your answer to question # 2 is Ayes@, who would you choose as Trustee?

Trustee: _____

Alternate Trustee (in case your first choice cannot act): _____

5. Do you wish to express who should be the guardian of your kids in the event of the death of both you and your spouse? Expressing a preference for the guardianship of your children in your will does not legally grant that individual guardianship for the children. However, it is heavily influential in who is granted guardianship.

____ Yes ____ No

6. If your answer to question # 5 is Ayes@, who would you choose to be Guardian of your children?

Guardian: _____

Alternate Guardian (in case your first choice cannot act):

7. Do you want a ALiving Will[@], which is a separate document giving you the power to direct the withholding of medical treatment when you are terminally ill and, if you are unconscious or otherwise unable to make a decision on medical treatment, authorize a named family member or trusted friend to make such decisions on your behalf?

____ Yes ____ No

8. If your answer to question # 7 is Ayes@, who would you choose as your Caregiver?

Caregiver:

Name :

Address:	
Alternate Caregi	ver (in case your first choice cannot act):
Name:	
Address:	
Telephone #:	

9. Do you want a ADurable Power of Attorney@, which is a separate document giving a named family member or trusted friend the power to act on your behalf for financial matters despite your disability or incapacity, thus avoiding the need for costly and time consuming court proceedings to appoint a guardian, in the event of your future disability or incapacity?

____ Yes ____ No

Please list your assets with the approximate values and ownership (i.e. Husband, wife, joint with spouse or children, etc.) of each, in the following categories. This information is needed in case you and your spouse are deceased. It will allow your named executor to accurately locate your assets.

A. Real Estate Owned (Including title owner information and value of any mortgages):

B. Business Affiliations and Interests:

C. Stocks, Bonds, and Investments:

D. Savings Accounts and Certificates of Deposits:

E. <u>Safe Deposit Boxes (Including location and how registered)</u>:

F. Loans Owed to You or Other Liabilities:

G. <u>Pensions and I.R.A.=s (Including beneficiary designation)</u>:

H. <u>Personal Property (Including automobiles, furs, jewelry, art, or other items of substantial value)</u>:

I. Life Insurance (Including beneficiary designation):

Section D: Disposition of Estate

Please designate specific items of personalty, such as jewelry, furs, works of art, silverware, china, etc. Where shares are bequeathed, please indicate if increments, splits, mergers, and substitutions are included. Where income of stock is bequeathed, please indicate if cash dividends are included.

1. To Spouse:

Special Conditions or Contingencies:

2. To:	
	Relationship:
	Address:
	Age (if under 18):
5. 10:	Relationship:
	Relationship: Address:
	Age (if under 18):
4. To:	
	Relationship:
	Address:
	Age (if under 18):
5. To:	
	Relationship:

Relationship:

	Address:			
6. To: 1	Age (if under 18):			
	Relationship: Address:			
7	Age (if under 18):			
7. To:]	Relationship: Address:			
	Age (if under 18):			
8. Charitable Bequests:				

9. Funeral, Burial, Monument, Services, Grave Care, etc:
