



Living Children

Full Legal Name of Child _____ Date of Birth: _____

Relationship:

this marriage husband's prior marriage wife's prior marriage unmarried relationship

Full Legal Name of Child _____ Date of Birth: _____

Relationship:

this marriage husband's prior marriage wife's prior marriage unmarried relationship

Full Legal Name of Child _____ Date of Birth: _____

Relationship:

this marriage husband's prior marriage wife's prior marriage unmarried relationship

Full Legal Name of Child _____ Date of Birth: _____

Relationship:

this marriage husband's prior marriage wife's prior marriage unmarried relationship

Deceased Children

Full Legal Name of Child _____ Date of Birth: _____

Date of Death: _____

Relationship:

this marriage husband's prior marriage wife's prior marriage unmarried relationship

Full Legal Name of Child _____ Date of Birth: _____

Date of Death: _____

Relationship:

this marriage husband's prior marriage wife's prior marriage unmarried relationship



Will Provisions

Burial or Cremation Preferences

	Partner 1	Partner 2
Burial or Cremation	Burial Cremation	Burial Cremation
Do you wish to donate your organs?	Yes No	Yes No
Specific Place for Burial or Disposition of Ashes.	Burial Next to: _____ Ashes Interred Next to: _____ Ashes scattered Where Other instructions:	Burial Next to: _____ A Ashes Interred Next to: _____ Ashes scattered Where Other instructions:



Tangible Personal Property

General Gift of All Tangible Personal Property (Tangible Personal Property includes furniture, furnishings, clothing, jewelry, china, silver, crystal, automobiles, boats, collectibles, etc. Note: *We typically add a paragraph in the will stating: "I may leave among my personal papers a memorandum identifying certain items of my tangible personal property for distribution at my death to one or more persons"*

	Partner 1	Partner 2
All Tangible Personal Property goes to Spouse, and if Spouse is deceased to Children in equal shares, and if a Child is deceased, then to their Children	Choose This Option	Choose This Option
All Tangible Personal Property Goes to Spouse, and if spouse is deceased, to Children <i>and Step- children</i> in equal shares .If a Child/or Step-child is deceased, then the their portion goes to their children.	Choose This Option	Choose This Option
All Tangible Personal Property goes to Spouse, and if Spouse is deceased, to other beneficiaries (please provide details).	Choose This Option ____ % to: _____ ____ % to: _____ ____ % to: _____ ____ % to: _____	Choose This Option ____ % to: _____ ____ % to: _____ ____ % to: _____ ____ % to: _____
If one of the beneficiaries is deceased, then their portion shall go to successor beneficiary listed.	Successor beneficiaries: _____ _____ _____	Successor beneficiaries: _____ _____ _____
<i>+Other: Please list your own preferences for who should receive your Tangible Personal Property. Please provide details</i>		

Gifts of Specific Items of Tangible Personal Property

Please list any Tangible Personal Property that you want to leave to someone other than your Spouse, even if your spouse is alive. Or that you want to leave to a specific child or other beneficiary after your spouse is deceased.

Description of Personal Property Item	Name of Beneficiary	City and State Where Beneficiary Resides	Relationship to Beneficiary

Attach an additional sheet if you need to list more items of Tangible Personal Property.



Real Property (Real Estate)

General Gift of All Real Property

This includes your principal residence and all other real estate you own (e.g., vacation home, investment property, etc.)

	Preferences	Comments
All Real Property goes to Children in equal shares, and if Children are deceased, then to their Children.	Choose This Option	
All Real Property goes to Children and if a Child is deceased, then the remaining survivors shall split that Child's portion.	Choose This Option	
<p>All Real Property shall be split as indicated:</p> <p>_____ % to: _____</p> <p>_____ % to: _____</p> <p>_____ % to: _____</p> <p>_____ % to: _____</p> <p>If one of the beneficiaries is deceased, then their portion shall go to the successor beneficiary listed:</p> <p>Successor beneficiaries:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	Choose This Option	
I wish for the property to be sold and added to my residue estate.	Choose This Option	
Other: Please list your own preferences for who should receive your Real Property. Please provide details in the comments section.	Choose This Option	



Residue

Residue includes all other assets passing under your will, as part of your probate estate such as bank or brokerage accounts in your individual name, and stocks or bonds in your individual name.

	Preferences	Comments
All Residue goes to Children in equal shares, and if Children are deceased, then to their Children.	Check to Choose This Option	
All Residue goes to Children and if a Child is deceased, then the remaining survivors shall split that Child's portion.	Check to Choose This Option	
All Residue shall be split as indicated: If one of the beneficiaries is deceased, then their portion shall go to the Successor beneficiary listed.	Choose This Option _____ % to: _____ _____ % to: _____ _____ % to: _____ _____ % to: _____ Successor beneficiaries: _____ _____ _____	
Other: Please list your own preferences for who should receive your residue. Please provide details in the comments section.	Choose This Option	
Place the Residue in a Trust.	Choose This Option	

What if all Tangible, Real Estate and Residue beneficiaries (e.g. Your children, grandchildren and Specific beneficiaries) die before receiving the principal? Who should receive the remaining Assets?

My closest living heirs-at-law, under Georgia law

Specify list of beneficiaries and amounts or percentages to each



Terms of Trusts (only if applicable to your estate plan)

Typically, we include a trust for any will that includes young children. If you have chosen to include Trusts in your estate plan, please make one the following additional choices. Note: We recommend using the age of 25 as the youngest age to start with.

All in One Payment	Two Payments	Three Payments
Age for Payment _____	Age for 1 st Payment _____	Age for 1 st Payment _____
	Percentage of Total Paid in 1 st Payment _____ %	Percentage of Total Paid in 1 st Payment _____ %
	Age for 2 nd Payment _____	Age for 2 nd Payment _____
	Percentage of Total Paid in 2 nd Payment _____ %	Percentage of Total Paid in 2 nd Payment _____ %
	Payment Entire Remainder	Age for 3rd Payment _____
		Percentage of Total Paid in 3rd Payment _____ %
		Payment Entire Remainder

What if all Trust beneficiaries (e.g. your children) die before receiving the entire Trust principal? Who should receive any remaining Trust Assets?

The Trust beneficiary's estate.

To the Trust beneficiary's descendants and if no children, revert back to the residue section in my will

My closest living heirs-at-law, under Georgia law

Specify list of beneficiaries and amounts or percentages to each

Trustee

Please list who you would nominate for the following positions and their relationship to you

	Partner 1		Partner 2	
	Designee	Your Relationship	Designee	Your Relationship
Personal Representative a/k/a Executor				
Alternate Personal Representative(s)				
Trustee(s)				
Alternate Trustee(s)				



Guardian of Minor Children

Who will serve as Guardians of your minor children (if applicable)? **Note:** If the Mother or Father are living, they will automatically be appointed Guardian, unless there are extenuating circumstances.

	Partner 1	Partner 2
Primary Guardian	Full Name: _____ Relationship: _____ City and State of Residence: _____ _____ <i>Should their spouse serve as Co-guardian? If so, please fill in:</i> Full name of Spouse: _____ <i>If you wish to have your appointed Guardian's spouse appointed as Co-guardian, are you comfortable with only one of the Guardians named serving as sole Guardian if the Guardian named or their spouse is deceased?</i> Yes No	Full Name: _____ Relationship: _____ City and State of Residence: _____ _____ <i>Should their spouse serve as Co-guardian? If so, please fill in:</i> Full name of Spouse: _____ <i>If you wish to have your appointed Guardian's spouse appointed as Co-guardian, are you comfortable with only one of the Guardians named serving as sole Guardian if the Guardian named or their spouse is deceased?</i> Yes No
Secondary Guardian	Full Name: _____ Relationship: _____ City and State of Residence: _____ _____ <i>Should their spouse serve as Co-guardian? If so, please fill in:</i> Full name of Spouse: _____ <i>If you wish to have your appointed Guardian's spouse appointed as Co-guardian, are you comfortable with only one of the Guardians named serving as sole Guardian if the Guardian named or their spouse is deceased?</i> Yes No	Full Name: _____ Relationship: _____ City and State of Residence: _____ _____ <i>Should their spouse serve as Co-guardian? If so, please fill in:</i> Full name of Spouse: _____ <i>If you wish to have your appointed Guardian's spouse appointed as Co-guardian, are you comfortable with only one of the Guardians named serving as sole Guardian if the Guardian named or their spouse is deceased?</i> Yes No



Advance Directive and Power of Attorney

In addition to a will, we can prepare an Advance Directive for Health Care, which combines the two documents that were formerly executed as a living will and a durable health care power of attorney, into one form. We can also prepare a General Power of Attorney. The Advance Directive provides for an enforceable expression of your desire not to be sustained on life support systems if you are in a terminal condition and unable to speak for yourself and expresses your wishes in the face of the need for life sustaining treatment or resuscitation. It also appoints someone to act as your health care agent in the event you cannot speak for yourself. It allows someone to “step into your shoes” to manage anything health care related on your behalf (including access to medical records).

If you wish to have an Advanced Directive, please designate the individual (agent) that you wish to make health care decisions, and a successor *if so desired*:

Advanced Directive

Partner 1	Partner 2
Designee Name: _____ Address: _____ Phone #s _____ Home Cell Work Email: _____	Designee Name: _____ Address: _____ Phone #s _____ Home Cell Work Email: _____
Successor #1 Name: _____ Address: _____ Phone #s _____ Home Cell Work Email: _____	Successor #1 Name: _____ Address: _____ Phone #s _____ Home Cell Work Email: _____
Successor #2 Name: _____ Address: _____ Phone #s _____ Home Cell Work Email: _____	Successor #2 Name: _____ Address: _____ Phone #s _____ Home Cell Work Email: _____

