



Texas Bar College
Professionalism Through Education

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Certified by the Board of Legal
Specialization in Residential Real Estate

WILL PLANNING QUESTIONNAIRE

I. PERSONAL INFORMATION

Please give full legal names of all persons you name on this form.

A. Husband:

(1) Name _____

(2) Birth Date _____

(3) Occupation _____

(4) Address and Phone _____

(5) Business Address and Phone _____

B. Wife:

(1) Name _____

(2) Birth Date _____

(3) Occupation _____

(4) Address and Phone _____

(5) Business Address and Phone _____

C. States Resided in other Than Texas (and Dates of Residence)

D. Date and Place of Marriage _____

E. Prior Marriage (s) if any _____

(1) How Terminated _____

(2) When terminated _____

(3) Where terminated _____

(4) Financial responsibilities _____

F. Family Members: Children, grandchildren, parents, etc. Put “PM” by names of children from prior marriage and “H” or “W” to indicate whether a prior marriage of husband or wife; e.g., “PM-W” means child of prior marriage of wife.

Name	Birth Date or Approximate Age	Relation
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_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**G. Financial Advisors, if any**

(1) **Principal Bank** _____

(2) **Trust Officer** _____

(3) **Accountant** _____

(4) **Insurance Advisor** _____

(5) **Broker or Investment Advisor** _____

**H. Safe Deposit Box**

Location: _____

Person with Access: _____

**I. Other Personal Information** (or family characteristics you feel should be mentioned)

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**II. ESTATE PLANNING OBJECTIVES**

**A. Where would you want your property to go** (without regard to the impact of any estate and inheritance taxes) **if:**

(1) You die leaving spouse and descendants

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(2) You and your spouse die leaving descendants

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(3) You and your spouse die leaving no descendants

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**B. Whom would you want as executor:** (administrator trust, invest and manage assets, make distributions, etc.)?

1. _____
2. (Alternate) _____
3. (Alternate) _____

**C. Whom would you want as trustee, if any** (administrator trust, invest and manage assets, make distributions, etc.)?

1. _____
2. (Alternate) _____
3. (Alternate) _____

**TRUST AGE DISBURSEMENT:** _____

**D. If you and your spouse die leaving minor children, who would you want to be their guardian?**

1. _____
2. (Alternate) _____
3. (Alternate) _____

**E. Do you want powers of attorney (CIRCLE ONE) (Durable or General) or (Medical) and who do you want to be the Attorney in fact or Agent?**

Name: _____  
Address: _____  
Phone Number: _____

Name: _____  
Address: _____  
Phone Number: _____

**F. Do you want a burial or cremation request in the Will: (CIRCLE ONE) (YES or NO) (BURIAL or CREMATION)**

If burial, location of cemetery _____  
_____

**G. Do you want to be able to add a memorandum to your Will, if you later desire, to designate items to a beneficiary?**

YES _____ NO _____

**H. Do you have any specific bequests? If so, what item and who will get it?**

1. _____
2. _____
3. _____
4. _____
5. _____

