

David P. Hvizdos, Esquire
Attorney at Law
505 Valleybrook Road, Suite 206
McMurray, Pennsylvania 15317
724-941-5400
724-941-8455 (facsimile)

121 East Penn Street
Bedford, PA 15522
814-623-0669

QUESTIONNAIRE FOR LAST WILL AND TESTAMENT

1. Your full name: _____
Home Address: _____

2. How to reach you:
Home Number: _____
Cell Number: _____
Email: _____

3. Your spouse's full name: _____

4. Do you have children? _____ If so, please list below:

- | | |
|----------|------------|
| a. _____ | Age: _____ |
| b. _____ | Age: _____ |
| c. _____ | Age: _____ |
| d. _____ | Age: _____ |

5. Whom do you select as Executor (and alternate) of your Estate? (This person must carry out the directions in your will, dispose of the property, collect debts, adjust claims and distribute the assets of your estate.)

Name	Relation
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(Alternate) Name	Relation
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6. Does the value of your estate exceed \$5,000,000.00? _____

7. Do you plan to leave your entire estate to your spouse? _____

8. Assuming you and your spouse are both deceased, whom do you select to serve as Guardian (and alternate) for your minor children? (This person will assume the daily duties of raising your children)

Name Relation

(Alternate) Name Relation

9. Whom do you select as Trustee (and alternate) for your minor children? (Your Trustee will manage the money left in trust to your children for their support, maintenance and education)

Name Relation

(Alternate) Name Relation

10. Assuming trust funds are established for any minor children, at what age (or ages) do you wish trust funds to be disbursed? _____

11. Do you want a Power of Attorney? _____ (This allows you to select someone to make financial decisions for you in the event you are unavailable or fall ill) If so, whom do you select as your agent?

Name Relation

(Alternate) Name Relation

12. Do you want a Healthcare Power of Attorney? _____ (This allows you to select someone to make decisions governing your health in the event you are incapacitated) If so, who do you select as your agent?

Name Relation

(Alternate) Name Relation