

KOHLHOFF & WELCH
Attorneys at Law
A Mother Daughter Partnership

Theresa M. Kohlhoff

Elizabeth E. Welch

5828 North Lombard
Portland, Oregon 97203

VOICE 503.286.7178
FAX 503.286.3788

Date: _____

WILL QUESTIONNAIRE

1. Name: _____

Phone: _____

Address: _____

Married? _____ Yes: Spouse's name:

_____ No: Are you anticipating being married in the near
future?

If No, are you, Divorced _____ Widow(er)

Are you planning on being divorced in the near future? _____ Yes

_____ No

2. Have you previously entered into a contract to make a Will?

_____ Yes

_____ No

3. Have you entered into a prenuptial agreement?

_____ Yes: Please provide a copy to my office.

_____ No

4. Have you previously made a Will?

Last Revised 12/18/06

_____ Yes: Where is it?

_____ No

5. Do you have any real property? _____ Yes _____ No

If Yes, where is it located? County _____ State _____

6. Please print the name of the individual you would like to be the Personal Representative (Executor) of your estate. _____

If, for any reason, this individual would be unable to serve, please print the name of the person you would like to be the alternate Personal Representative.

Do you desire to have your Personal Representative post a bond?

_____ Yes

_____ No

7. Do you have any children?

_____ No: please go to question 8.

_____ Yes: please complete the following:

NAME

AGE

NATURAL

ADOPTED

STEPCHILD

Who would you like to have serve as guardian for your minor child(ren)?

If, for any reason, this individual would be unable to serve, please print the name of the person you would like to serve as alternate guardian for your minor child(ren)? _____

8. Are there any specific cash bequests you would like to make?

_____ No, please go to question 9.

_____ Yes, please complete the following:

NAME

AMOUNT OF CASH TO BE GIVEN

9. Are there any specific gifts you would like to give to an individual? (These are gift which are not required to be made, and are generally reserved for those gifts which have some commercial or sentimental value for close friends or relatives, and nonprofit organizations.)

_____ No, please go to question 10.

_____ Yes, please complete the following:

NAME

DESCRIPTION OF ITEM(S)

In the event that you have given a gift to more than one person, and if one or more of the people were to die before receiving their inheritance, to whom would you like the deceased person's share to go? _____

10. To whom do you want to give all the rest of your property?

In the event that person(s) does not survive you, then to whom?

Would you want your gift to your children to be placed in trust?

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_____ Not applicable.

_____ No: please go to question 11.

_____ Yes: please complete the following:

Please print the name of the person you would like to be the Trustee for the benefit of your children.

If, for any reason, this individual would be unable to serve, please print the name of the person you would like to be the alternate Trustee.

At what age would you like your child(ren) to receive the remainder of their share of the estate?

11. For each of the following interests, please let us know the following information:

Is it owned by you as an individual or jointly with someone else, or who is designated as the beneficiary.

TYPE OF ASSET	OWNERSHIP: Individual	Jointly with	
Patents, mineral and royalty interests, proprietorships, informal partnerships or intangible personal property?			
Real Property			
Bank Accounts			
Retirement Benefits			
Business Interests			
The right to receive payments from any contract, notes, mortgages or other source:			
Life Insurance			
Stock and Bonds			

Please mail this questionnaire to me or call for an appointment. I will make a draft and we can then see what questions you might have before signing your will.

Thank you.

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