



After completing this form, please send it to our Florence office via email, fax, or the postal service. Once we receive the form, we will contact you to schedule an appointment for you to come in and finalize your documents.

2210 Helton Drive, Florence, AL 35630 • Phone (256) 333-5000 Fax (256) 349-2529

WILLS FOR WARRIORS

Client Information

Name:					C	Date:	
	Last		First		М.І.		
Addres							
	Stre	eet Address				Apartm	nent/Unit #
	City	/			State		Zipcode
Phone:			Email	:			
Marital	State	us: 🔲 Single;	Married;	Divorced;	Uidowed		
	UP	ON YOUR DEAT	H, WHO DO YO	OU WANT YOU	R PROPERTY TO	GO TO:	
Spor	use;	Children;	🗋 Spouse/T	hen Children;	Other		
Full legal name of spouse :							
Full leg	al na	mes & current			adopted by yo	ou:	101.1.
·			-				
name.	Last		First		М.І.	Age:	
Name:						Age:	:
	Last		First		M.I.		
Name:	Last		First		M.I.	Age:	:
Name:						Age:	
	Last		First		М.І.		·
Name:			ring t			Age	:
	Last		First		М.І.		
Name:	Last		First		M.I.	Age:	:
Name:						Aae	
	Last		First		М.І.		

What does your estate consist of?

For example: real property/house/land; personal property/cars/guns/other items of value; bank accounts/retirement accounts/other financial assets/stocks/bonds

Describe Those Items:		
If your spouse dies before you your then living children? Yo	ı, do you want your estate divided evenl ^ı es; 🔲 No	y between
If a child dies before you, do yo (your grandchildren)? 🖵 Yes;	ou want that child's share to go to their 🗋 No	child/children
Who do you want to handle yo	our Will when you die? (Personal Represe	entative)
Spouse:		
Last	First	M.I.
Child:	First	M.I.
Other:		
Last	First	М.І.
If that person is unable to carr your next choice? (Alternate)	ry out your wishes, state the name and r	relationship of
Last	First	<i>M.I.</i>
Are any of your beneficiaries u	under the age of 19? 🗖 Yes; 🛛 🗋 No	
	-	

C. Do you want your deceased child's share of your estate to go to his or her issue (children/grandchildren of that deceased child)? Yes; No

D. If your children are minors (under 19 years), then please state the name of the individual(s) you would like to appoint as Trustee and (to care for your children's inheritance):

Last			First	М.І.
(Alternate):				
Last				М.І.
	,			

If your children are minors (under 19 years), then please state the name of the individual(s) you would like to recommend for guardianship (to care for your children):

Last	First	M.I.
(Alternate):		
Last	First	M.I.

Excluded/Omitted:

Do you want to **exclude/omit** any individuals from your will? ****Yes; ****No If yes, then state Full Name of Each Person(s) to be **excluded/omitted**:

Last	First	М.І.
Last	First	M.I.

Specific Bequests:

Do you want to make any specific bequests? (For example: my wedding ring to my daughter or my gold watch to my nephew)? If so, then state:

Item:			
(Ex: Ring, Watch, Etc.)	Last	First	M.I.
Item:			
(Ex: Ring, Watch, Etc.)	Last	First	M.I.
Item:			
(Ex: Ring, Watch, Etc.)	Last	First	M.I.
Item:			
(Ex: Ring, Watch, Etc.)	Last	First	М.І.