LAST WILL AND TESTAMENT SURVEY FORM

A will only controls those assets you leave behind titled just in your name and that do not have a beneficiary attached to them. For example, if you own your home alone and have not recorded a transfer on death deed naming one or more beneficiaries you want to own your home when you after your death, the transfer of your home will be ordered by the probate court. If you have named someone in your will to inherit your home, the probate court will oversee the transfer to that person according to the terms of your will. To avoid the probate process you can name a beneficiary on your home, checking/savings accounts, investments, cars, boats etc. In Minnesota all wills are subject to the probate process unless the total assets to be transferred by a will are less than \$75,000 in value and do not include land. In the will, you name the person or persons you want to be responsible for settling your affairs, carrying out the terms of the will and otherwise implementing your last wishes and instructions. That person is called your personal representative.

TESTATOR (PERSON MAKING THIS WILL) Full Name_____ Date of Birth _____ U.S. Citizen? Yes _____ No ____ Spouse's Full Name _____ Date of Birth _____ U.S. Citizen? Yes No Street Address _____ Apt ____ County ____ City _____ State ____ Zip ____ State of Residence _____ Telephone Number: H: ______ Cell: _____ Spouse Cell: _____ If you are single, are you: _____ Divorced ____ Widowed ____ Never Married PERSONAL REPRESENTATIVE(S) Please list the person or persons you've selected to serve as the personal representative of your estate. For married couples, it is assumed that you wish to serve as personal representative for one another. Name: _____ Relationship to you: Telephone: Home: _____ Cell: _____

Relationship to you:

Address:		
Telephone: Home:	Cell:	
ALTERNATE PERSONAL REPRE	ESENTATIVE(S)	
Name:		
Relationship to you:		
Address:		
Telephone: Home:	Cell:	
Name:		
Relationship to you:		
Address:		
Telephone: Home:	Cell:	
1. 2. 3. 4.	s full names and dates of birth.	
1. Is there any reason NO	OT to treat your children equally? If so, explain.	
 Do any of your childre Do you have any speci 	en have a disability? ial concerns or objectives regarding your childre	n?
<u>GUARDIANS</u>		
both parents die while the chi	ersons who will serve as guardian of your mino ildren are still minors. If you list a married couplentify who should continue to serve as guardian	e to serve as guardians and
Name:		

Relationship to you:		
Address:		
Telephone: Home:	_ Cell:	
Name:		
Relationship to you:		
Address:		
Telephone: Home:	_Cell:	
SPECIFIC GIFTS		
property. The gifts here should be m full name of the person or entity to re give special gifts, your will must be s transferred to the person or persons	c gifts you would like to give. Do not list items of oney gifts, such as a \$10,000 charitable donation eceive the gift and their relationship to you, if any ubmitted to the probate court in order to have to you name to receive them. If you do not wish to some other method rath	n. Please give the . If you choose to those special gifts subject your loved
Gift No. 2		
OTHER CONSIDERATIONS		
1. Do you expect any inheritance	e in the near future?	

- 2. Do you intend to specifically disinherit anyone? If yes, please identify the individual(s) and their relationship to you.
- 3. If you have other instructions not addressed by any of the above please lists them below. Also include any questions you might have about the probate process that come to mind as you complete this form. Please feel free to add a separate sheet if needed.