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Will Worksheet

Single Individual with or without Children

Welcome to the Office of Legal Assistance. This worksheet will answer common questions concerning wills. It will prepare you to discuss your needs and desires with a legal assistance attorney, and provide a convenient form on which to record important information. This worksheet starts the will preparation process. Once completed, you are ready to discuss your will with your attorney.

IF YOU HAVE ANY QUESTIONS, WHICH ARE NOT ANSWERED BY THIS WORKSHEET, PLEASE DISCUSS THEM WITH AN ATTORNEY.

WHAT IS A WILL? A Will is a legal document, which states your desires concerning what will happen to your property after your death. A Will also contains specific directions from you concerning who is to implement your instructions and perhaps, who will care for any minor children you may leave behind.

DOES MY WILL CONTROL ALL OF MY PROPERTY WHEN I DIE? No. For example, proceeds of insurance policies are distributed as you have designated in the insurance policy, and property that you own jointly with another person will normally go to the other joint owner. You should name a Pay on Death (POD) beneficiary with your financial institution for your financial accounts.

WILL QUESTIONNAIRE

NOTE: YOU MUST USE FULL LEGAL NAMES OF ALL PERSONS NAMED IN THIS QUESTIONNAIRE.

TESTATOR/TESTATRIX:

Your FULL Name:

You are (choose one):
___ in the United States

- retired from the United States Armed Forces
- a dependent of someone in the United States Armed Forces
- a dependent of someone retired from the United States Armed Forces

Are you a United States citizen? Yes No

Do you wish to include your city, county, and state of residence? Yes No

Address: _____

City, County, State, Zip Code: _____

Please mark as appropriate:

male female

married [once/ several] - date of marriage(s): _____

widow(er)

divorced

single

a party to a same-sex marriage, domestic partnership or civil union

previously made a Will - date(s): _____

Your Telephone number: _____

Occupation/Employment/Business: _____

CHILDREN:

Do you wish to make a declaration regarding children? Yes No (If no skip to next section)

Children: NONE 1 2 3 4 Number: _____

more children are anticipated

no child, but children are anticipated

___ there are grandchildren

Adopted children are to be ___ expressly included, ___ expressly excluded or ___ this Will is to be silent on the subject.

Stepchildren are to be ___ expressly included, ___ expressly excluded or ___ this Will is to be silent on the subject.

Enter the names of the children (and indicate gender, if minor, deceased with issue, by prior marriage, adopted, and any special treatment):

FULL legal Name: _____
Date of Birth: _____
Gender: _____ biological ___ step ___ adopted ___

FULL legal Name: _____
Date of Birth: _____
Gender: _____ biological ___ step ___ adopted ___

FULL legal Name: _____
Date of Birth: _____
Gender: _____ biological ___ step ___ adopted ___

TANGIBLE PERSONAL PROPERTY: Do you wish to make a personal property memorandum giving certain tangible personal property to certain individuals?
___ Yes ___ No

Beneficiary receiving tangible personal property:

___ living children (and descendants of a deceased child)
___ one beneficiary
___ two or more beneficiaries

Beneficiaries, if other than children:

Beneficiary's FULL name _____

Relationship _____

Beneficiary's FULL name _____

Relationship _____

Beneficiary's FULL name _____

Relationship _____

DISINHERITANCE:

Do you wish to make a declaration in the will which intentionally disinherits one or more living heirs? ____ Yes ____ No

If yes, please list:

FULL legal name: _____

Relationship: _____

Reason for Disinheritance: _____

FULL legal name: _____

Relationship: _____

Reason for Disinheritance: _____

MILITARY HONORS:

Do you desire burial with military honors or other military traditions? ____ Yes ____ No

Do you wish to include instructions to distribute American flags to specified persons?
____ Yes ____ No

If yes, please provide name(s):

BURIAL PREFERENCES:

__ cremation with ashes scattered in or at a specified location

__ cremation with ashes given to specified person

cremation with ashes given to specified person and scattered in or at a specified location

burial at specified location

burial at location chosen by the Executor

other (if chosen, please specify _____)

Do you wish to include instructions regarding a preference for a religious or non-religious ceremony? Yes No _____ Religious denomination

GIFTS:

Do you wish to make a specific gift of personal property? Yes No

Description of property _____

Beneficiary's FULL name _____

Relationship _____

Alternate Beneficiary's FULL name, if any _____

Relationship _____

Do you wish to make a specific division of real property? Yes No

Description of property _____

Beneficiary's FULL name _____

Relationship _____

Alternate Beneficiary's FULL, if any _____

Relationship _____

Do you wish to make a cash gift? Yes No

Beneficiary's FULL name _____

Relationship _____

RESIDUARY ESTATE:

Beneficiary receiving residuary estate:

- living children (and descendants of a deceased child)
- held in a trust (you will name a trustee later in the will worksheet)
- equal separate shares to living children
- one or more beneficiaries in equal shares
- two or more beneficiaries in unequal shares

Beneficiaries, if other than children:

Beneficiary's FULL name _____

Relationship _____

Beneficiary's FULL name _____

Relationship _____

Beneficiary's FULL name _____

Relationship _____

EXECUTOR:

Who do you wish to appoint Executor of the will? Yes No

Primary Executor FULL name _____

Relationship _____

Do you wish to appoint a co-executor? Yes No

Co-Executor FULL name _____

Relationship _____

Do you wish to appoint a successor executor? Yes No

Successor Executor FULL name _____

Relationship _____

TRUSTEE, if any:

A trust is mainly used if a beneficiary is a minor or an incapacitated person unable to manage an inheritance.

USE FULL LEGAL NAMES

Do you wish to appoint a trustee and is the trustee the person you name as your executor of your estate? ____ Yes ____ No

Name _____ Relationship to you _____

Who is to the beneficiary of the Trust and what is their relationship to you?

Name _____ Relationship to you _____

Name _____ Relationship to you _____

Name _____ Relationship to you _____

Name _____ Relationship to you _____

If the beneficiary of the Trust is/are minors at what age do you want them to receive the remaining assets or distribution of the Trust? _____

If the beneficiary of the Trust predeceases you or passes before distribution of remaining assets are assets to be distributed per capita _____ or per stirpes _____ [Per capita-their share is distributed to the other beneficiaries] [Per stirpes-their share is distributed to their children, if any]

Are assets to be distributed equally Yes ____ No _____ or in some other unequal division?

Are assets to be held in a "pot" trust and distributed when all beneficiaries reach the age specified or held in individual trusts for each beneficiary until age specified?

If so, explain _____

Are income distributions to be made prior to age of maturity of the Trust (interest or earned investments from the trust)? Yes _____ No _____

If so, annual interest distributions or some other distribution? Explain _____

If the trust falls below a certain amount or the operation of the trust costs more than the interest or earned investments made, at what amount of the trust do you want to make full distribution and dissolve the trust? _____

Do you wish for executors or trustees to be provided compensation? _____ Yes ___ No

Do you wish for executors or trustees be required to give a bond for performance of duties? Yes _____ No _____

GUARDIANSHIP OF CHILDREN: if applicable: (in the event the other parent or guardian is no longer living or parental rights have been withdrawn)

Do you wish to appoint:

___ one guardian for minors or persons deemed incompetent

___ two co-guardians who will act jointly

___ one guardian and a successor guardian

Will the same individual be appointed as the guardian of the person and estates of the minor children? Yes _____ No _____

Guardian of Person FULL name: _____

Alternate Guardian FULL name: _____

Custodian of Estate FULL name: _____

Alternate Custodian FULL name: _____

A beneficiary must have attained what age to be entitled to receive a bequest outright -
__18 __19 __21 __ or some other age, specify

If a child of the testator/testatrix is a minor, are bequests to the child to be -
__paid, at the ELECTION of the executor, to the child, a guardian or a custodian
under a Uniform Gifts To Minors Act, OR the executor may hold the bequest in
trust (usually this option is best)
__held in trust [by __a TRUSTEE or __the executor] until child attains the age
indicated previously

Do you want a No-Contest Clause? Yes _____ No _____ (see below)

If any beneficiary shall contest the validity of this Will or any part of it, or any trust which is a residuary legatee hereunder, or shall institute or join in, except as a party defendant, any such contest or proceeding to prevent, hinder or delay the provisions of this Will or such trust from being carried out in accordance with its terms, not including a petition for instructions for the interpretation of this Will or such trust instituted in good faith and for probable cause, then all interests in this Will otherwise passing to such beneficiary shall be revoked and shall pass under this Will and such trust as if such beneficiary [**OPTIONAL:** and such beneficiary's issue] had predeceased me.]

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For more information on this topic or to consult with a legal assistance attorney contact the Arkansas National Guard Office of Legal Assistance at 501-212-5040 to establish eligibility and appointment times.