

SAVE TO COMPUTER BEFORE COMPLETING -- THEN OPEN IN ADOBE
WEB BROWSER WILL NOT SAVE INFO -- COMPLETE ONLY IN ADOBE PROGRAM
WILL QUESTIONNAIRE

Name of Testator/Testatrix _____ Date of Birth: _____

Address of Testator/Testatrix _____ City, St. of Birth _____

Marriages & Children:F qgu'y ku'y knleqpvckp'c'twvA

Name of spouse _____

Name of children with current spouse _____

Number of Previous Marriages _____

Name of First Spouse _____

How did marriage to first spouse end? _____

Name of children with first spouse _____

Name of Second Spouse _____

How did marriage to second spouse end? _____

Name of children with second spouse _____

Executor/Executrix:

Name of Independent Executor/Executrix _____

Name of Alternate Independent Executor/Executrix _____