



# LAW OFFICE OF DAVID PICKARD

ATTORNEY AT LAW

## Pour-Over Will Questionnaire (Supplemental to the Revocable Living Trust Client Questionnaire)

Please indicate whether this is a(n):  
 Individual Pour-Over Will  
 Joint Property Pour-Over Will  
 Community Property Pour-Over Will

### 1. Information about you:

Full Name: \_\_\_\_\_

Former Names/Aliases: \_\_\_\_\_

Address: \_\_\_\_\_

### 2. List who you would like to be the Executor of your will:

Executor: Name: \_\_\_\_\_

Address : \_\_\_\_\_

Phone: \_\_\_\_\_

Alternate Executor: Name: \_\_\_\_\_

Address : \_\_\_\_\_

Phone: \_\_\_\_\_



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**3. List the names, addresses, and date of birth of all your children, both minor and adult, natural born and adopted:**

Child #1 Name: \_\_\_\_\_

Address: \_\_\_\_\_

DOB: \_\_\_\_\_

Child #2 Name: \_\_\_\_\_

Address: \_\_\_\_\_

DOB: \_\_\_\_\_

Child #3 Name: \_\_\_\_\_

Address: \_\_\_\_\_

DOB: \_\_\_\_\_

Child #4 Name: \_\_\_\_\_

Address: \_\_\_\_\_

DOB: \_\_\_\_\_

Child #5 Name: \_\_\_\_\_

Address: \_\_\_\_\_

DOB: \_\_\_\_\_

**4. List who you would like to appoint as guardian for any of your minor children:**

Guardian: Name: \_\_\_\_\_

Address : \_\_\_\_\_

Phone: \_\_\_\_\_

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Alternate Guardian:            Name: \_\_\_\_\_  
   Address : \_\_\_\_\_  
   Phone: \_\_\_\_\_

Not Applicable [   ]

**5. Please list any specific property distributions you would like to make, as well as the name of the person you would like to give it to (Example: wedding and/or engagement rings, specific amounts of money, antiques, family heirlooms, etc.):**

Specific Gift                    Property Description: \_\_\_\_\_  
   \_\_\_\_\_  
   \_\_\_\_\_  
   Beneficiary                    \_\_\_\_\_  
   \_\_\_\_\_

Specific Gift                    Property Description: \_\_\_\_\_  
   \_\_\_\_\_  
   \_\_\_\_\_  
   Beneficiary                    \_\_\_\_\_  
   \_\_\_\_\_

Specific Gift                    Property Description: \_\_\_\_\_  
   \_\_\_\_\_  
   \_\_\_\_\_  
   Beneficiary                    \_\_\_\_\_  
   \_\_\_\_\_

Specific Gift                    Property Description: \_\_\_\_\_  
   \_\_\_\_\_  
   \_\_\_\_\_  
   Beneficiary                    \_\_\_\_\_  
   \_\_\_\_\_

Specific Gift                    Property Description: \_\_\_\_\_  
   \_\_\_\_\_  
   \_\_\_\_\_  
   Beneficiary                    \_\_\_\_\_  
   \_\_\_\_\_