



Advising Tillamook County for over 35 years

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WILL INTERVIEW FORM

Date: _____

Name: _____ Marital Status: _____

Address: _____

Home phone: _____ Work phone: _____ Occupation: _____

Date of Birth: _____ Place of Birth: _____ SSN: _____

Vet ID No.: _____ Union: _____ Local No.: _____

Do you have a Prenuptial Agreement in effect? _____

Spouse: _____ Work phone: _____ Occupation: _____

Date of Birth: _____ Place of Birth: _____ SSN: _____

Vet ID No.: _____ Union: _____ Local No.: _____

Date and Place of this marriage: _____

Former Marriage(s)

Former Spouse Name: _____

SSN of Former Spouse: _____

Date of Marriage: _____

Date of Divorce: _____

Date of Spouse's Death: _____

Copy of Dissolution
Papers:

provided to atty
 I do not have a
copy
 I will get a copy
and provide

provided to atty
 I do not have a
copy
 I will get a copy
and provide

provided to atty
 I do not have a
copy
 I will get a copy
and provide

Children:

Name: _____ Date of Birth: _____
Whose child? _____
Spouse: _____ Children: _____

Address: _____ Phone No: _____

Name: _____ Date of Birth: _____
Whose child? _____
Spouse: _____ Children: _____

Address: _____ Phone No: _____

Name: _____ Date of Birth: _____
Whose child? _____
Spouse: _____ Children: _____

Address: _____ Phone No: _____

Name: _____ Date of Birth: _____
Whose child? _____
Spouse: _____ Children: _____

Address: _____ Phone No: _____

Name: _____ Date of Birth: _____
Whose child? _____
Spouse: _____ Children: _____

Address: _____ Phone No: _____

ASSETS

Home: Address _____
 Owned by: _____ Value: _____
 Mortgage balance: _____ Furniture Value: _____

Other real property:

1. Address (location) _____
 Owned by: _____ Value: _____
 Value: _____ Mortgage Value: _____

2. Address (location) _____
 Owned by: _____ Value: _____
 Value: _____ Mortgage Value: _____

3. Address (location) _____
 Owned by: _____ Value: _____
 Value: _____ Mortgage Value: _____

Stocks, Bonds, Mutual Funds or other financial investments:

Name/Location	Account No.	Owner(s)	Value

Bank Accounts:

Amount	Bank/Branch	Account No.	Owner(s)
Money Market	_____	_____	_____
CD's	_____	_____	_____
Checking	_____	_____	_____
Savings	_____	_____	_____
Other	_____	_____	_____

Annual Income: _____ Spouse's: _____

Retirement Benefits (Including IRA's):

Name of Investment	Owner	Beneficiary if any	Present Value
_____	H__ W__	_____	\$ _____
_____	H__ W__	_____	\$ _____
_____	H__ W__	_____	\$ _____
_____	H__ W__	_____	\$ _____
_____	H__ W__	_____	\$ _____

Safe Deposit Box:

Safe Deposit Box: _____ Name of Institution: _____
Branch: _____ Box No. _____ Ownership: H__ W__ Jt__
Others listed on box:
Name: _____ Relationship: _____
Address: _____
Phone: _____

Business Interests (how held and control):

Partnership: _____
Corporation: _____
Sole Proprietorship: _____
LLC: _____
Other: _____

Collections (coins, stamps, etc.):	Value
_____	_____
_____	_____
_____	_____

Life Insurance:

Company	Owner	Beneficiary	Alternate	Death Benefit
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Automobiles and machinery:

Value

Jewelry:

Value

Expected Inheritance:

Amount

Trusts:

Are you serving as a trustee? _____ or the beneficiary of a trust? _____
 Or are you a grantor for a trust? _____. If yes to any of the above, please describe:

Other Assets:

Description	Owner	Value
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Estate Summary:

	Husband	Wife	Joint
Real Estate	\$ _____	\$ _____	\$ _____
Stocks, Bonds, etc.	\$ _____	\$ _____	\$ _____
Bank Accounts	\$ _____	\$ _____	\$ _____
Retirement Ben.	\$ _____	\$ _____	\$ _____
Business Interests	\$ _____	\$ _____	\$ _____
Collections	\$ _____	\$ _____	\$ _____
Life Insurance	\$ _____	\$ _____	\$ _____
Automobiles	\$ _____	\$ _____	\$ _____
Jewelry	\$ _____	\$ _____	\$ _____
Miscellaneous	\$ _____	\$ _____	\$ _____
Other	\$ _____	\$ _____	\$ _____
Total	\$ _____	\$ _____	\$ _____

Any person you prefer not to inherit? _____

Do you wish for more information on any of the following?

Power of Attorney: _____
Advance Directive: _____
International Will Certificate: _
Organ Donor Information: ____
Living Trust: _____

Important Family Questions:

1. Do you have a child with a learning disability? Y/N
2. Do any of your family receive governmental support or benefits? Y/N
3. Do you have adopted children? Y/N
4. Do any of your children have special education, medical, or physical needs? Y/N
5. Are any of your children institutionalized? Y/N
6. Are you or your spouse receiving social security, disability, or other governmental benefits? Y/N
7. Do you provide primary or other major financial support to adult children? Y/N
8. Have either of you been divorced? Y/N
9. Are you making payments pursuant to a divorce or property settlement agreement? Y/N
10. Have you and your spouse ever signed a pre-or post-marriage contract? (please furnish a copy) Y/N
11. Have you or your spouse been widowed? (If a federal estate tax return or a state death tax return was filed, please furnish a copy) Y/N
12. In what states have you lived while married to your current spouse? During what periods of time did you reside there? _____
13. Have you or your spouse ever filed federal or state gift tax returns? Please furnish copies of these returns) Y/N
14. Have you or your spouse completed previous wills, trusts, powers of attorney or other estate planning arrangements? (Please furnish copies of these documents) Y/N
15. Are both you and your spouse US citizens? Y/N
If you answered "No," are either you or your spouse a resident or a nonresident alien? Y/N
16. Do you want specific funeral arrangements? Y/N
Specify, if applicable: _____

Special Considerations

Cash needed at time of death? _____ Disability? _____
Avoiding probate? _____

Distribution

Special Bequest: _____

Residue: _____

Right of Representation: _____

Trust:

Income Beneficiaries? _____
Remaindermen? _____
Age? _____
Income? _____
Equality of distribution? _____
Distribution age? _____
Termination? _____

Trustee's Powers:

- (q) Trustee may use time payments on purchases? _____
- (r) Trustee may borrow money? _____
- (s) Trustee may distribute tangible assets, in divided or undivided interests and adjust valuations, at any time free from trust? _____
- (t) Trustee may withhold any tangible personal property from sale and may distribute? _____
- (u) Trustee to allow beneficiary to use residential property rent-free with no requirement to sell or reinvest? _____
- (v) Trustee may delegate investment powers to others? _____ includes investment in mutual funds? _____
- (w) Trustee shall furnish annual accounting? _____
- (x) Value of trust falls below \$_____, terminate trust? _____
- (y) Support and care of income beneficiaries preferred over remaindermen? _____
- (z) Trustee deemed to have acted with authority? _____
- (aa) Non-corporate trustee only liable for gross negligence? _____
- (ab) Certificate of incumbency? _____
- (ac) Trustee may loan money to children/beneficiaries? _____

#8 Spendthrift? _____
Trustee _____
Address _____
Alternate Trustee _____
Address _____

Guardian and Conservator:
Guardian _____
Alternate Guardian _____
Conservator _____
Alternate Conservator _____

Will Not a Contract: _____
Disinheritance Clause: _____
Funeral/Burial: _____

Personal Representative: Spouse? _____
First Alternate: _____
Address: _____
Second Alternate: _____
Bond: _____