

R. Shawn Majette
Will-Interview Questionnaire

Date: _____

1. _____
Your Name (as you wish it to appear in your will). Social Security # Phone (w) (h) (m)

2. _____
Marital Status If Married, Spouse's Name. Social Security # Phone (w) (h) (m)

3. _____
Mailing Address (including City, State and Zip Code). Today's Date

4. Circle City/County of Legal Residence. Richmond - Henrico - Chesterfield - Other _____

5. List all children. It is important that all of your children be listed, whether they are (i) biological or adopted children, (ii) children of a present marriage, a prior marriage, or born out of wedlock, and (iii) even though they may have been adopted by someone else.

Name of Oldest Child _____ Age _____

Next Child _____ Age _____

Next Child _____ Age _____
(Please list other children on the back of this page)

6. Do you own any real estate or personal property located outside Virginia? _____

7. If married, have you, during this marriage, lived in Arizona, California, Idaho, Louisiana, New Mexico, Nevada, Texas, Washington, or Wisconsin? _____

8. Do you understand that a will can be changed or revoked at any time unless it has been written pursuant to a contract that prohibits such action?..... _____

9. Have you read the pamphlet, "Why You Need A Will," by Rodney Johnson?..... _____

10. Circle the approximate size of the estate (including insurance).
Under \$50,000 \$50,000 to \$250,000 \$250,000 to \$500,000 Over \$500,000

11. Who would you like to serve as your Executor? _____
a. Address: _____
b. Relation to you: _____

12. As your successor Executor? _____
a. Address: _____
b. Relation to you: _____

13. As your Trustee? _____
a. Address: _____
b. Relation to you: _____

14. As your successor Trustee? _____
a. Address: _____
b. Relation to you: _____

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(Attorney Use Only)

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|-----|-----------------------|---------------------|---------------|---------------------|
| 1. | ILY - Other | Stirpes - Capita | AD = In - Out | IL = In - Out |
| 2. | TST = Fm - Sp | Dist Age ____ | TA = Wv - No | SB = Wv - No |
| 3. | NRF = In - Out | TPL = Yes - No | WO = Std - No | NP = OK - ? |
| 4. | IBD = OK - ? | WC = Yes - No | OD = Yes - No | LW = Yes - No |
| 5. | Exr (S)(S/E) | S/S/E _____ | | |
| 6. | Tee | S/T _____ | | |
| 7. | Gdn | S/G _____ | | |
| 8. | Gpa (S) | S/A _____ | | |
| 9. | Mpa (S) | S/A _____ | | |
| | | Telephone [_____] | | Telephone [_____] |
| 10. | Special Instructions: | | | |