

**WILL INFORMATION SHEET**  
**Tourkow Crell Rosenblatt & Johnston LLP**

**Testator/rix:**

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

Spouse: \_\_\_\_\_

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

City, County, State: \_\_\_\_\_

Telephone: (work) \_\_\_\_\_ (home) \_\_\_\_\_

(cell) \_\_\_\_\_ (e-mail) \_\_\_\_\_

Marital Status: \_\_\_\_\_

Children of Marriage:	Age:	Date of Birth:
_____	_____	_____
_____	_____	_____
_____	_____	_____

Children of Prior Marriage: (Testator)	Age:	Date of Birth:
_____	_____	_____
_____	_____	_____
_____	_____	_____

Children of Prior Marriage: (Testatrix)	Age:	Date of Birth:
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Guardian for Minor Children:**

First Choice: \_\_\_\_\_

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

Successor Guardian: \_\_\_\_\_

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

Bond Requested: \_\_\_\_\_

**Trustee (if appropriate):**

First Choice: \_\_\_\_\_

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

Successor Trustee: \_\_\_\_\_

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

**Personal Representative/Executor:**

First Choice: \_\_\_\_\_

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

Successor Personal Representative: \_\_\_\_\_

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

**Specific Bequests:**

Item:	Beneficiary:	Over and Above Residue:
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