

# Will Information Worksheet

Attached please find the Client Information Worksheet for preparation of your Will and accompanying documents.

**PLEASE NOTE**: We receive a high volume of will worksheets and each one requires personal attention. If there is a need to expedite your will please let us know that when it is submitted.

After you have completed the form, Please return it to:

wills@cleat.org

or

CLEAT ATTENTION: Wills 400 West 14<sup>th</sup> Street, Suite 100 Austin, Texas 78701

Should you have any questions, please do not hesitate to contact us at: 512.495.9111

We value your CLEAT membership

### MEMBER'S WILL INFORMATION WORKSHEET

### PERSONAL DATA

MEMBER	'S FUL	L NAME				4		
Street Addr	ress			City				
County of Residence			State		Zip			
Home	e Phone	( )		Mobile	e Phone	(	)	
Employer				Wor	k Phone	(	)	
E-mail				Male_			Female	

SPOUSE'S FULL NAME	
Male Female	
Married Domestic Partner	
Single/Divorced/Widowed	

## CHILDREN'S INFORMATION: (include separate page if needed)

Include biological, adopted and stepchildren regardless of whether they will benefit in your will

Full Name	Birth Date	For each child, state the full name of the child's other parent <b>if not your present spouse</b> .
1)	/ /	
2)	/ /	
3)	/ /	
4)	/ /	
5)	/ /	
6)	/ /	

# PLEASE REFER TO THE ATTACHED FREQUENTLY ASKED QUESTIONS & ANSWERS FOR ADDITIONAL INFORMATION ON WILLS AND OTHER ESTATE PLANNING TOOLS

### MEMBER'S DISPOSITIVE PLAN

I leave all my property to my spouse

I leave all my property first to spouse / then children

I leave all my property to other / no spouse / no children

I leave all my property to children / no spouse / no other

I leave all my property to spouse / then other / no children

Describe below how you wish to distribute your property under your will if not one of the above. Please name "other". Please state whether to include step-children.

### **MEMBER'S DESIGNEES**

# EXECUTOR \*\*

The person who will be responsible for probating your will, filing the estate tax return if necessary, and distributing assets to the beneficiaries.

### This is typically a spouse. Alternates are recommended

Full Name of Executor	Relationship
1 <sup>st</sup> Alternate Executor	Relationship
2 <sup>nd</sup> Alternate Executor	Relationship

\*\* Indicate if the appointed Executor in the Will is to be compensated YES\_\_\_\_\_ NO\_\_\_\_

If you select "Yes", then the following will be inserted:

"As compensation for [his/her] services hereunder, my Independent Executor or any successor named shall be entitled to charge the same fees customarily charged for similar services in other estates at the time the services are rendered."

If you select "No", then the following will be inserted:

"The Independent Executor shall serve without compensation."

# TRUSTEE

(should both parents die, the person who will be responsible for the long-term management of <u>property</u> for your minor children. The trust will automatically distribute to minors once they reach the age of 18 unless specified otherwise. Distribution of trust at age: \_\_\_\_\_\_Alternates are recommended – one name per line

Full Name of Trustee	Relationship
1 <sup>st</sup> Alternate Trustee	Relationship
2 <sup>nd</sup> Alternate Trustee	Relationship

# **GUARDIAN OF MINOR CHILDREN**

(should both parents die, the person who will take <u>physical care</u> of your minor children) Alternates are recommended – one name per line

Full Name of Guardian	Relationship
1 <sup>st</sup> Alternate Guardian	Relationship
2 <sup>nd</sup> Alternate Guardian	Relationship

# **POWER OF ATTORNEY**

(the person who will be responsible for handling your financial affairs in the event you become incapacitated) This is typically a spouse. Alternates are recommended

Full Name of P	ower of	Attor	ney					1
Address		City						
County of Residence					State		Zip	
Home Phone		(	)		Work Pho	ne	( )	
Full Name of 1	<sup>st</sup> Alterna	te PO	DA					
Full Name of 2	<sup>nd</sup> Altern	ate P	OA					

I desire the POA to become effective: immediately; therefore POA can handle your financial affairs when you are out of town or otherwise unavailable

only upon my disability or incapacity

# **MEDICAL POWER OF ATTORNEY**

(the person who will make medical decisions for you in the event you are unable to make them for yourself. *Subject to directive*)

This is typically a spouse. Alternates are recommended

Full Name of N	Medical Power of Attorney			
Address				
City		State	Zip	
Home Phone	( )	Work Phone	( )	

Full Name	of Alternate	Medica	al Power of Attorney				
Address							
City				State		Zip	
Home Phor	e	(	)	Work F	hone	( )	

Full Name of 2 <sup>nd</sup> Alternate Medical Power of Attorney							
Address							
City					State	Zip	
Home Phor	ne	(	)	Work P	hone	( )	

# **HIPAA Release**

### Authorization to disclose Protected Health Information

Check here if same designee as MPOA

Full Name of	Deletionskin
Authorized Recipient	Relationship
1 <sup>st</sup> Alternate Recipient	Relationship
2 <sup>nd</sup> Alternate Recipient	Relationship

# **DIRECTIVE TO PHYSICIANS AND FAMILY OR SURROGATES**

- Q. What is a "Directive to Physicians and Family or Surrogates"?
- A. A Directive to Physicians and Family or Surrogates (also known as a living will) is a document which provides instructions to an attending physician to withhold or withdraw life sustaining procedures in the event of a terminal or irreversible condition.

The directive allows you to determine if you would prefer life support withdrawn if you are terminally ill and will die in six (6) months or if you are in an irreversible condition and will die without life support. If you choose to eliminate life sustaining procedures, in either situation you would only receive treatment that keeps you comfortable.

### Please select your desired arrangement below:

Terminal:	Life support	Irreversible:	Life Support
	No life support		No Life Support

Member's Signature \_\_\_\_\_ Date\_\_\_\_\_

### SPOUSE'S WILL INFORMATION WORKSHEET

### PERSONAL DATA

SPOUSI	E'S FUL	L NAME						
Street Addr	ress			City				
County of Residence			State		Zip			
Hom	e Phone	( )		Mobile	e Phone	(	)	
Employer				Wor	k Phone	(	)	
E-mail				Male_			Female_	

MEMBER'S FULL NAME	
Male Female	
Married Domestic Partner Single/Divorced/Widowed	

# CHILDREN'S INFORMATION: (include separate page if needed)

Include biological, adopted and stepchildren regardless of whether they will benefit in your will

Full Name	Birth Date	For each child, state the full name of the child's other parent <b>if not your present spouse</b> .
1)	1 1	
2)	/ /	
3)	/ /	
4)	/ /	
5)	/ /	
6)	/ /	

# PLEASE REFER TO THE ATTACHED FREQUENTLY ASKED QUESTIONS & ANSWERS FOR ADDITIONAL INFORMATION ON WILLS AND OTHER ESTATE PLANNING TOOLS

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I leave all my property to other / no spouse / no children

I leave all my property to children / no spouse / no other

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Describe below how you wish to distribute your property under your will if not one of the above. Please name "other". Please state whether to include step-children.

### SPOUSE'S DESIGNEES

### **EXECUTOR \*\***

(the person who will be responsible for probating your will, filing the estate tax return if necessary, and distributing assets to the beneficiaries.

### This is typically a spouse. Alternates are recommended

Full Name of Executor	Relationship
1 <sup>st</sup> Alternate Executor	Relationship
2 <sup>nd</sup> Alternate Executor	Relationship

\*\* Indicate if the appointed Executor in the Will is to be compensated YES\_\_\_\_\_ NO\_\_\_\_

If you select "Yes", then the following will be inserted:

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(should both parents die, the person who will be responsible for the long-term management of <u>property</u> for your minor children. The trust will automatically distribute to minors once they reach the age of 18 unless specified otherwise. **Distribution of trust at age:** \_\_\_\_\_\_ Alternates are recommended

Full Name of Trustee	Relationship
1 <sup>st</sup> Alternate Trustee	Relationship
2 <sup>nd</sup> Alternate Trustee	Relationship

# **GUARDIAN OF MINOR CHILDREN**

(should both parents die, the person who will take <u>physical care</u> of your minor children) Alternates are recommended

Full Name of Guardian	Relationship
1 <sup>st</sup> Alternate Guardian	Relationship
2 <sup>nd</sup> Alternate Guardian	Relationship

# **POWER OF ATTORNEY**

(the person who will be responsible for handling your financial affairs in the event you become incapacitated) This is typically a spouse. Alternates are recommended

Full N	ame of P	Power	r of A	ttorney					
Addres	ss								
City						State		Zip	
Home	Phone		(	)	W	Vork Pho	ne	( )	í.
Full Name of 1 <sup>st</sup> Alternate POA									
Full Name of 2 <sup>nd</sup> Alternate POA									

I desire the POA to become effective: [	<b>immediately</b> ; therefore POA can handle your financial affairs when
(Choose one)	you are out of town or otherwise unavailable

only upon my disability or incapacity

# MEDICAL POWER OF ATTORNEY

(The person who will make medical decisions for you in the event you are unable to make them for yourself. *Subject to directive*)

This is typically a spouse. Alternates are recommended

Full Name of M	Medical Power of Attorney			
Address		City		
County of Residence	5.	State	Zip	
Home Phone	( )	Work Phone	( )	

Full Name of A	Alternate Medical Power of Atto	rney		
Address		City		
County of Residence		State	Zip	
Home Phone	( )	Work Phone	( )	

Full Name of 2	2 <sup>nd</sup> Altern	nate Medic	al Power of At	torney				
Address					City	1		
County of Residence					State		Zip	
Home Phone	hone ( ) Work		Work P	hone		( )		

# **HIPAA Release**

## Authorization to disclose Protected Health Information

Check here if same designee as MPOA

Full Name of Authorized Recipient	Relationship
1 <sup>st</sup> Alternate Recipient	Relationship
2 <sup>nd</sup> Alternate Recipient	Relationship

# **DIRECTIVE TO PHYSICIANS AND FAMILY OR SURROGATES**

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The directive allows you to determine if you would prefer life support withdrawn if you are terminally ill and will die in six (6) months or if you are in an irreversible condition and will die without life support. If you choose to eliminate life sustaining procedures, in either situation you would only receive treatment that keeps you comfortable.

#### Please select your desired arrangement below:

Terminal:	Life support	Irreversible:	Life Support
	□ No life support		No Life Support

Spouse's Signature	Date

# IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT YOUR LOCAL CLEAT OFFICE AT:

### **ADMINISTRATION OFFICE**

400 West 14<sup>th</sup> Street, Suite 100 Austin, Texas 78701 Phone: 512/495-9111 Fax: 512/495-9301 800/252-8153

#### SOUTH TEXAS REGIONAL OFFICE

1939 N.E. Loop 410 #210 San Antonio, Texas 78217 Phone: 210/826-1899 Fax: 210/826-2299 800/752-5328

#### WEST TEXAS REGIONAL OFFICE

747 E. San Antonio #103 El Paso, Texas 79901 Phone: 915/533-4924 Fax: 915/533-5117 800/328-9940

#### **COASTAL BEND OFFICE**

3122 Leopard Corpus Christi, Texas 78408 Phone: 361/883-3224

### **DALLAS CLEAT**

3730 Ladd Street, Suite B Dallas, TX 75212 972/960-3226 FAX 214/826-9078

#### NORTH TEXAS REGIONAL OFFICE

2501 Parkview Street, Suite 605 Fort Worth, Texas 76102 Phone: 817/882-9548 Fax: 817/882-9586 800/825-3281

#### EAST TEXAS REGIONAL OFFICE

9800 NW Freeway, Suite 307 Houston, Texas 77092 Phone: 713/263-7600 Fax: 281/880-9998 800/422-5328

#### **PANHANDLE OFFICE**

2201 University Avenue, Suite B Lubbock, Texas 79410 Phone 806/472-9111 Fax 817/882-9586

### **RIO GRANDE VALLEY OFFICE**

1601 West Trenton Road, Suite I Edinburg, TX 78539 956/702-4422

<u>CONFIDENTIALITY NOTICE</u>: This document is a privileged and confidential attorney-client communication and is transmitted for the exclusive information and use of the addressee. Unauthorized persons receiving this communication are admonished that this communication may not be copied or disseminated except as directed by the addressee.

<u>If you have received this communication in error</u>, please immediately notify our office at 1-800-252-8153 and return original message to the Combined Law Enforcement Associations of Texas, 400 W. 14<sup>th</sup> St., Ste. 100, Austin, TX 78701 via the U.S. Postal Service at our expense. Thank you.

# **FREQUENTLY ASKED QUESTIONS & ANSWERS**

#### Q. What happens if I die without a Will?

A. If a person dies without a Will, the court disposes of his or her property. The law provides for the orderly distribution of property at death to surviving heirs by degree of kinship. Dying without a Will may cause undesired results and unexpected costs and delays. Because a person usually has an idea how he or she would like his or her property to pass on to others, undesired results can occur if you die without a Will.

For example, very often one spouse wants to leave everything to the surviving spouse who will provide for the children. If the deceased person, decedent, in this situation is survived by children from a previous marriage, those children share in the distribution of property whether or not the decedent desired such results.

#### Q. What can a Will do?

A. A Will is a legal instrument, which states how property is to be distributed at death. A valid Will avoids many of the problems that may arise from dying without a Will and allows a person to leave property to who he or she desires. A Will can also designate the individual who will manage the estate, the independent executor, and name a Guardian and Trustee for minor or incapacitated children.

Naming a guardian who is willing and able to take care of your children and naming a person who will manage your children's inheritance is extremely important. The only way to do this is through a Will. Otherwise, a Judge, who is not personally acquainted with the deceased's relatives or friends, decides who will care for the children and who will be in charge of their money and other property.

#### Q. What are probate assets?

A. Only property owned by the decedent at death can be disposed of by Will. These are called "probate assets." A Will cannot make a gift of "non-probate assets" -- assets which pass at death other than by Will or intestacy. The principal types of non-probate assets include property passing by contract, property passing by survivorship, and property held in trust.

Property passing by contract includes life insurance proceeds, IRAs, and employee benefit plan proceeds, such as the proceeds payable under a pension, profit-sharing, or employee retirement plan.

These assets pass outside the Will to the persons named by the decedent in the appropriate beneficiary designations. Thus, it is important to periodically review the beneficiary designations with respect to these types of assets and to update them as necessary.

Property held by the decedent and another person as joint tenants with right of survivorship passes outside the Will directly to the survivor. Survivorship assets typically include certain limited types of bank accounts or certificates of deposit and certain savings bonds issued by the United States Government, such as Series EE savings bonds.

Another category of property that passes outside of probate is property held in a trust for the benefit of the decedent. The trust may have been created by the decedent during his or her lifetime for property management purposes or by someone else, such as a parent of the decedent. Trust assets pass under the terms of the trust rather than under the terms of the deceased's Will.

It is important to determine the extent of one's non-probate assets when planning the disposition of one's property at death. If a substantial portion of the assets would not pass under the Will, even a well-drafted Will may be insufficient to carry out the testator's intent in disposing of his or her property.

#### Q. What is community property and what is separate property?

A. Texas law -- somewhat awkwardly -- defines community property as that which is not separate property. Separate property is that which was owned by a spouse before the marriage, as well as property received after marriage by gift or inheritance. Everything else is community property. For example, the earnings of both spouses during marriage are generally community property. Income from separate property during marriage can also be community property. When drafting your Will, you must consider what property you own outright and what property you own jointly with another.

#### Q. What is an Independent Executor?

A. An executor is the person appointed in your Will to be the primary representative of your estate. Because of a provision somewhat unique to Texas law, you can make your executor "independent." That is, the executor can act free of control by a court, except for only a few essential matters. Without this independence, virtually all of the executor's actions will be subject to prior approval by the court-- an obviously cumbersome and expensive procedure.

Your executor will be responsible for administering your estate. This includes ascertaining your properties and your liabilities. He must prepare a list of your properties and submit them to the court. After debts have been paid (including estate and inheritance taxes), the executor gives his final accounting and makes distributions to the beneficiaries in your Will.

We recommend that you choose your spouse, if you are married, as the primary Executor.

#### Q. Who will raise my minor children after my death? What is a Guardian?

A. The other parent. But if the other parent is not living, this becomes a selection you can make in your Will. If you fail to do so, the Court will make the choice for you. Needless to say, you should assume the responsibility of this important decision and not leave it up to a Judge.

If you have planned your estate properly, the guardian should not experience financial difficulty in raising your children. To accomplish this, we suggest that upon the death of you and your spouse, a trust be established for your minor children.

We recommend an individual Guardian as opposed to joint Guardians. Remember the guardian that you choose is someone other than you and the other parent.

#### Q. What is a Financial Power of Attorney?

A. A power of attorney (POA) is an instrument by which one person, as principal, appoints another as his agent and gives him or her the authority to act on behalf of the principal. The person holding a power of attorney is known as an "attorney in fact" or "agent."

The value of a Financial Power of Attorney is found in its power to handle your financial affairs in the event of incapacitation. Many of our clients wisely choose their spouses to act as their agent under the Financial Power of Attorney. This is a recommended choice due to the fact that many of the assets held by a married couple are community assets. With a Financial Power of Attorney in force, each spouse has full power and authority to manage the marriage assets and liabilities. This would include the power to transfer real estate held in both names and to cash checks made payable to the other spouse. If a Financial Power of Attorney was not in force, and a spouse was incapacitated, the other spouse could not continue with the affairs of the household unless a guardianship proceeding was initiated on behalf of the incapacitated spouse.

Who should be the agent? In view of the authority and discretion conferred by a financial power of attorney, the agent must be someone in whom the principal has complete trust and confidence. If you are married, we recommended you designate your spouse

#### Q. What is a Medical Power of Attorney?

A. Texas law permits a Medical Power of Attorney. The purpose of the special POA is to permit a person to create a POA only for purposes of medical care, and it permits the appointed person to make health care decisions for an incapacitated principal. The POA becomes effective only after the attending physician certifies in writing that the principal lacks the capacity to make health care decisions, but no treatment is permitted if the principal objects.

#### Q. What is a "Directive to Physicians and Family or Surrogates"?

A. A Directive to Physicians and Family or Surrogates (also known as a living will) is a document which provides instructions to an attending physician to withhold or withdraw life sustaining procedures in the event of a terminal or irreversible condition. The directive allows you to determine if you would prefer life support withdrawn if you are terminally ill and will die in six (6) months or if you are in an irreversible condition and will die without life support. If you choose to eliminate life sustaining procedures, in either situation you would only receive treatment that keeps you comfortable.

#### Q. What is a HIPAA Release Form?

**A.** The authorization to disclose protected health information to a designated recipient.