## Will for Person with Children (Using Children's Trust)

- 1. To prepare this will, simply tab to each blank. Type in the appropriate information.
- 2. For each specific gift, you will need to type in the following sentence with the appropriate information:

I give <u>[describe gift]</u>, to <u>[name of beneficiary]</u>, my <u>[relationship of beneficiary to you]</u>, or if not surviving, then to <u>[name of alternate beneficiary]</u>, my <u>[relationship of alternate beneficiary to you]</u>.

Repeat this sentence and use the gifts page as often as necessary. If your page (or more) of gifts takes up less than a full page, please type in the following sentence at the end of the gifts:

[THE REST OF THIS PAGE IS LEFT INTENTIONALLY BLANK.]

- 3. If you are using a will for children, but have no grandchildren, simply type the word "no" in the blank, before the word "grandchildren."
- 4. If you are using a will for children, but your children are not minors, you may simply discard or not print the page for guardianship and the children's trust.
- 5. If you do not desire to donate your organs or specify your funeral arrangements, you may simply discard or not print that particular page.
- 6. Please refer to the more detailed instructions in the accompanying book for completing and signing your will.
- 7. *Please note*: After completing this form on your computer, you should print out this form. You cannot save your completed form to your hard drive.

## Last Will and Testament of

I,

whose address is declare that this is my Last Will and Testament and I revoke all previous wills.

My marital status is that:

I have child(ren) living, whose vital information is as follows:

Name

Address

Date of Birth

I have grandchild(ren) living, whose vital information is as follows:

Name

Address

Date of Birth

Page \_\_\_\_ of \_\_\_\_ pages

I make the following specific gifts:

Page \_\_\_\_ of \_\_\_\_ pages

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I give all the rest of my property, whether real or personal, wherever located, to
my
or if not surviving, to
my
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All beneficiaries named in this will must survive me by thirty (30) days to receive any gift under this will. If any beneficiary and I should die simultaneously, I shall be conclusively presumed to have survived that beneficiary for purposes of this will.

I appoint my of as Executor, to serve without bond. If not surviving or otherwise unable to serve, I appoint my of as Alternate Executor, also to serve without bond. In addition to any powers, authority, and discretion granted by law, I grant such Executor or Alternate Executor any and all powers to perform any acts, in his or her sole discretion and without court approval, for the management

and distribution of my estate, including independent administration of my estate.

## [THE REST OF THIS PAGE IS LEFT INTENTIONALLY BLANK]

If a Guardian is needed for my minor child(ren), I appoint my of as Guardian of the person and property of my minor child(ren), to serve without bond. If not surviving, or unable to serve, I appoint my of as alternate guardian, also to serve without bond. In addition to any powers, authority, and discretion granted by law, I grant such Guardian or Alternate Guardian any and all powers to

discretion granted by law, I grant such Guardian or Alternate Guardian any and all powers to perform any acts, in his or her sole discretion and without court approval, for the management and distribution of the property of my minor child(ren).

If my child(ren) is/are under years of age, upon my death, I direct that any property that I give my child(ren) under this will be held in an individual trust for my child(ren), under the following terms, until my child(ren) shall reach years of age.

In addition, I appoint

my of

as trustee of any and all required trusts, to serve without bond. If not surviving, or otherwise unable to serve, then I appoint

my

of

as Alternate trustee, also to serve without bond. In addition to all powers, authority, and discretion granted by law, I grant such trustee or alternate trustee full power to perform any act, in his or her sole discretion and without court approval, to distribute and manage the assets of any such trust.

In the trustee's sole discretion, the trustee may distribute any or all of the principal, income, or both, of any such trust as deemed necessary for the beneficiary's health, support, welfare, and education. Any income not distributed shall be added to the trust principal.

Any such trust shall terminate when the beneficiary reaches the required age, when the beneficiary dies prior to reaching the required age, or when all trust funds have been distributed. Upon termination, any remaining undistributed principal and income shall pass to the beneficiary; or if not surviving, to the beneficiary's heirs; or if none, to the residue of my estate. I also declare that, pursuant to the Uniform Anatomical Gift Act, I donate any of my body parts and/or organs to any medical institution willing to accept and use them, and I direct my Executor to carry out such donation

Funeral arrangements have been made with the of for burial at located in and I direct my Executor to carry out such arrangements.

[THE REST OF THIS PAGE IS LEFT INTENTIONALLY BLANK]

Page \_\_\_\_ of \_\_\_\_ pages

I publish and sign this Last Will and Testament, consisting of \_\_\_\_\_\_ typewritten pages, on \_\_\_\_\_\_, 20 \_\_\_\_\_, and declare that I do so freely, for the purposes expressed, under no constraint or undue influence, and that I am of sound mind and of legal age.

Signature of Testator

Printed Name of Testator

We, the undersigned, being first sworn on oath and under penalty of perjury, state that:

On \_\_\_\_\_\_, 20 \_\_\_\_\_, in the presence of all of us, the above-named Testator published and signed this Last Will and Testament, and then at Testator's request, and in Testator's presence, and in each other's presence, we all signed below as witnesses, and we declare, under penalty of perjury, that, to the best of our knowledge, the Testator signed this instrument freely, under no constraint or undue influence, and is of sound mind and legal age.

Signature of Witness #1

Signature of Witness #3

Printed Name of Witness #1

Printed Name of Witness #3

Address of Witness #1

Address of Witness #3

Signature of Witness #2

Printed Name of Witness #2

Address of Witness #2

Page \_\_\_\_ of \_\_\_\_ pages

## Notary Acknowledgment

State of		_
County of		-
On	, 20,	the
and	, the witnesses, p	personally came before me and,
stated.		
Signature of Notar	/ Public	
-	nd for the County of	_
My commission ex	pires:	– Notary Seal