Cookerly & Barroll, LLC 123 Court Street, Chestertown, MD 21620 (410) 778-2112

Last Will & Testament Simple Will Worksheet

Your	full name:
Your	county of residence:
I des	sire to have my remains: Interred Cremated
I hav	re previously purchased a burial plot: 🔲 Yes 🔲 No
Nam	e of cemetery that you wish to be buried (whether or not you have already
purc	hased a burial plot:
Pers	on to be named as your Personal Representative(s). (The person you name will
be e	ntitled to compensation from your estate for their services.):
Alter	nate:
	I am married and desire that my spouse receive all my assets and property of whatever kind and character. The full name of my spouse:
	I am not married; or I am married, but in the event my spouse shall predecease me. I want my assets to be distributed as follows:
	(Attach a separate sheet, if needed.)
	(Attach a separate sheet, if needed.)
	I have specific items of property or sums of money that I would like to designate to specific persons or organizations. Use a separate sheet and list each item and the recipient of that item or monetary bequest.

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Children

$\hfill \square$ I have no children or my children have reached the age of majority.
☐ I have minor children and wish to name
as their guardian. My choice for an
alternate is
The names of my children:
<u></u>
I want the guardian of my children to have control of any assets which they shall inherit.
I wish to establish a Trust for the benefit of my minor children:
The age at which each child shall gain control of his/her share:
The person(s) who shall be the Trustee(s):
Use this space to make notes about other issues or questions that you want to discuss with your attorney:

Bring this form with you to your appointment.