

# NEWTON LAW FIRM OF CLEMSON, LLC

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104 Pinnacle Street, Clemson, SC 29631



**\*\*Once completed, please email to [closing@rnewton.com](mailto:closing@rnewton.com), mail or drop off at our office.\*\***

## WILL/POWER OF ATTORNEY QUESTIONNAIRE

*Please contact our office for assistance completing this form if needed.*

Full Name:				
Current Address:				
Email:	Phone Number:			
Status: Single	Married	Widow/ Widower	Divorced	Significant Other
County of Residence:				

I have \_\_\_ MINOR children

I have \_\_\_ ADULT children

Full name of child: \_\_\_\_\_

Gender \_\_\_\_\_

Full name of child: \_\_\_\_\_

Gender \_\_\_\_\_

Full name of child: \_\_\_\_\_

Gender \_\_\_\_\_

Full name of child: \_\_\_\_\_

Gender \_\_\_\_\_

**Personal Representative:** \_\_\_\_\_

Gender \_\_\_\_\_

**\*\*Indicate if Joint (Co-) Personal Representatives are desired\*\***

(Optional)

1<sup>st</sup> Alternate PR: \_\_\_\_\_

Gender \_\_\_\_\_

2nd Alternate PR: \_\_\_\_\_

Gender \_\_\_\_\_

**GUARDIAN:** \_\_\_\_\_

Gender \_\_\_\_\_

(Optional)

1<sup>st</sup> Alternate: \_\_\_\_\_

Gender \_\_\_\_\_

2nd Alternate: \_\_\_\_\_

Gender \_\_\_\_\_

**\*\*NOTE:** Generally, a simple will for a married couple leaves everything to each other, then to their children.\*\*

Specific Bequests/Gifts	To: Name/Relation	Alternate if Beneficiary is Deceased

**Remainder to:** (FULL name) \_\_\_\_\_  
(relation) \_\_\_\_\_

**Then to:** (FULL name) \_\_\_\_\_  
(relation) \_\_\_\_\_, if said beneficiary has predeceased you.

Existing Trusts: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Additional Information: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I NEED A DURABLE POWER OF ATTORNEY \_\_\_\_\_

I NEED A HEALTHCARE POWER OF ATTORNEY \_\_\_\_\_

**Agent:** \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

**\*\*Indicate if Joint (Co-) Agents are desired\*\***

**Alternate Agent:** \_\_\_\_\_

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

Phone Number: \_\_\_\_\_