

PUHAC LAW OFFICES

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SIMPLE WILL INTAKE WORKSHEET

Please submit the following information to initiate a consultation with our office regarding establishing a simple will.

Note: If you need more space to complete the below questions, please feel free to attach additional sheets.

Principal Full Legal Name (person for whom the will is being created):

Principal E-mail Address: _____

Principal Mailing Address: _____

Principal SS No.: _____

Primary Phone Number: _____

Cell Home Work (circle one)

Secondary Phone Number: _____

Cell Home Work (circle one)

Spouse's Name, if any: _____

Principal City of Residence: _____

Principal County of Residence: _____

Principal State of Residence: _____

Spouse's City of Residence: _____

Spouse's County of Residence: _____

Spouse's State of Residence: _____

Names of Principal's Children:

FULL LEGAL NAME	AGE/ DATE OF BIRTH	CURRENT ADDRESS

Do you want to include adopted children? Yes No

Who do you want to name as your Personal Representative and what is his/her relationship to you: _____

Who is your second choice as Personal Representative and what is his/her relationship to you: _____

Describe the desired distribution of your assets:

If you have minor children, who do you want to name as Guardian of your children and what is their relationship to you:

Do you have a second choice as Guardian and, if yes, identify who and their relationship to you:

After this document has been completed, please e-mail it to RPuhac@pittsburghdivorcelaw.net or fax it to (412) 567-5254.

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