

PUBLIC SERVICE ANNOUNCEMENT

Attorney Jeffrey T. Killeen in Santa Cruz announces that his office will provide a free simple Last Will for any medical, police, food delivery, or other essential persons whose work is deemed essential and requires them to be exposed to the Corona virus COVID-19.

For additional information, please look at Mr. Killeen's website, www.JeffreyKilleen.com, or call the office at 831-600-7017.

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Plan • Settle • Fight

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To: PERSONS PROFESSIONALLY EXPOSED TO CORONAVIRUS COVID-19

RE: FREE SIMPLE LAST WILL

Table of Contents

I. A FREE SIMPLE LAST WILL.	page 1
II. Why I am Doing This.	page 1
III. The Info We Need.	page 1
IV. REQUIRED INFORMATION FORM	page 5
V. Getting Information From You to This Office.	page 6
VI. Then What Happens.	page 6
VII. EXAMPLE LAST WILL OF CHARLEY CLIENT	page 6

I. A FREE SIMPLE LAST WILL. Our medical and essential personnel are protecting the public, all of us, at risk to their very lives. As part of the protected public, I owe you my gratitude, of course. If I can offer more than my gratitude, I should. As an attorney with 30 years estate planning experience, I can. I see my duty in solidarity with you who are on the very front line of this battle to offer you brave people a free simple Last Will & Testament.

II. Why I am Doing This. There are a lot of people putting their lives at risk to care for the rest of us hiding at home. Doctors, nurses, orderlies, EMT. And not just medical people, although medical people take the worst of it. Everyone who is considered essential is at risk. Because if you are considered essential, then you have to leave your home to work. And that puts you at risk.

III. The Info We Need. First, you need to give us the information we need to write your Last Will.

Part III: Info We Need / Table of Contents

- A. You.
 - B. Executor.
 - C. Spouse.
 - D. Children.
 - 1. List Children.
 - 2. List Possible Guardians.
 - E. Next of Kin.
 - F. Non-Human Family.
 - G. Intended Recipients of Property.
 - H. Life Insurance, Bank & Investment Accounts.
 - 1. (Optional) Life Insurance.
 - 2. (Optional) Bank & Investment Accounts.
 - 3. (Optional) IRA/401k Accounts.
 - I. Other Property
 - J. Witness Selection.
 - K. Original Held By Selection
-

III. The Info We Need (Cont'd).

A. You. Give us your full legal name & address & date of birth

B. Executor. Give us the full name &, if possible, the address, telephone, & email of at least one or better two or three persons who you want to have be in charge of taking care of your affairs, that is, the "executor".

Note: If you nominate a person as executor, that person may not accept the job when the time comes, whether you ask them now or not. Even if he or she accepts nomination, the court may not actually appoint them. So, maybe better to name two or three alternates without asking, get your Last Will done, ask later, rewrite if they say no. If, when the time comes, they decline or fail to qualify, the court will find someone else. Not the best solution, but better than no Last Will because you wanted to ask first and because of the delay it did not get done.

C. Spouse. Give us the full name of your spouse, domestic partner, or "significant other", if any, and, if available, his or her address, email, & telephone, and let us know if this is a spouse, domestic partner, or "significant other".

D. Children.

1. List Children. Give us the full legal name and birthdate of your children, if any.

2. List Possible Guardians. If any of your children are minors, give us the full name, and, if available, the address, email, & telephone of who you want caring for your minor children, that is, their "guardian". Note: If you nominate a guardian, that person may not accept the job when the time comes, whether you ask them now or not. So, maybe better to name two or three alternates now without asking, get your Last Will done, ask later, rewrite if they say no. If they decline when the time comes, the court will find another.

E. Next of Kin. If you do not have descendants, give us the name, and, if available, the address, telephone, & email of your next of kin, that is, in order, parent, brother/sister, niece/nephew, grandparent, aunt/uncle, 1st cousin, etc.

F. Non-Human Family. Give us the name & species of any non-human family members that need to be taken care of. Give us the name, address, email, & telephone of who you want to care for your non-human family members.

Note: If you ask a person to care for your non-human family members, they do not have to accept the job if and when the time comes. This is true whether you ask them now or not. Therefore, it may be better to designate two or three without asking, get your Last Will done, ask later. If they decline, the executor will find someone else.

G. Intended Recipients of Property. Tell us who should receive your property.

H. Life Insurance, Bank & Investment Accounts. Note: It is better to get a Last Will done that does not identify life insurance and bank and investment accounts than it is to not get a Last Will done.

Whether the Last Will documents the life insurance, and investment and bank accounts or not:

- a. The life insurance goes to the designated beneficiary, if any, else as the Last Will provides, and
- b. The bank and investment accounts are distributed as the Last Will provides.

That said, it makes the executor's life a lot easier if the whereabouts of the major money assets of the estate are known from the terms of the Last Will. In other words, it is "nice to have", but definitely not required.

- 1. (Optional) Life Insurance.** Give us the **carrier** and, if possible, **the policy number** of any life insurance payable on your death and, if possible, **the designated beneficiary(ies)** who will receive the life insurance proceeds and the contact info for those beneficiaries.
- 2. (Optional) Bank & Investment Accounts.** Give us the names of banks & investment firms where you have an account, and, if possible, **the last four digits only** of any of these accounts.
- 3. (Optional) IRA/401k Accounts.** Give us the names of banks & investment firms where you have an account, and, if possible, **the last four digits only** of any account you have at those firms.

I. Other Property. Anything else important. Artwork, jewelry, collections, boats, family keepsakes, etc.

J. Choose Witnesses. For your Last Will to take lawful effect, your signature of that Last Will will have to be witnessed by two persons not related to you. Choices are co-workers, attorney & assistant, or other. Part VI below discusses the implications of each choice.

IV. REQUIRED INFORMATION FORM

	NAME	Address, telephone, EMAIL
A. You. _____		
B. Executor.		Address, telephone, EMAIL <input type="checkbox"/> More Alternates Exist
1. Alternate 1	_____	_____
2. Alternate 2	_____	_____
C. (check one) <input type="checkbox"/> Spouse / <input type="checkbox"/> Domestic Partner / <input type="checkbox"/> Significant Other		


D. Children.		
1. List Children.		Address, telephone, EMAIL <input type="checkbox"/> More Children Exist
1. birthday: _____	_____	_____
2. birthday: _____	_____	_____
3. birthday: _____	_____	_____
2. List Possible Guardians.		Address, telephone, EMAIL <input type="checkbox"/> More Alternates Exist
1. Alternate 1 name: _____	_____	_____
2. Alternate 2 name: _____	_____	_____
E. Next of Kin. (If no children or grandchildren)		Address, telephone, EMAIL <input type="checkbox"/> More Kin Exist
1. Relation: _____	_____	_____
2. Relation: _____	_____	_____
3. Relation: _____	_____	_____
F. Non-Human Family (e.g., dog Fido).		New Human (Owner) Name Address <input type="checkbox"/> More Pets Exist
1. Species: _____ Name: _____	_____	_____
2. Species: _____ Name: _____	_____	_____
G. Intended Recipients of Property.		%, shares, or \$ Amount
1. Name: _____	_____	(If not specified, then
2. Name: _____	_____	children equally or next of kin)
3. Name: _____	_____	
4. Name: _____	_____	
Accounts <input type="checkbox"/> More Accounts Exist	Institution (e.g. Bank of America)	Number: Policy or Last 4 of Acct
H1.a. (Optional) Life Insurance.	_____	_____
H1.b. (Optional) Life Insurance.	_____	_____
H2.a. (Optional) Bank/Invest Accts.	_____	_____
H2.b. (Optional) Bank/Invest Accts.	_____	_____
H3.a. (Optional) IRA/401k Accts.	_____	_____
H3.b. (Optional) IRA/401k Accts.	_____	_____
I. Other Property _____		
J. Witness Selection: (choose one) <input type="checkbox"/> Attorney & assistant <input type="checkbox"/> Co-workers <input type="checkbox"/> Other _____		
K. Original Held By Selection: (choose one) <input type="checkbox"/> Attorney <input type="checkbox"/> Client		









V. Getting Your Information From You to This Office.

Note: If you are comfortable and confident doing so, you can simply scan and email the information form above to our office, at Jeffrey@JeffreyKilleen.com. If not, you can call the office to be interviewed. To be interviewed, call our office, 831-600-7017, between 10 a.m. and 12 p.m., Monday through Friday.

VI. Then What Happens. Once the office has the necessary information:

- A. **Conflict of Interest Check.** Sorry folks, we have to do this. The office will do a conflict check to make certain that this office can represent you for the purposes of drafting a Last Will. In the unlikely event that a conflict is found, this office will refer you to another office.
- B. **Witness Choice Confirmed.** Your choice of witness (Item IV.J. above) reviewed.& confirmed.
- C. **Draft Last Will Returned.** We will email you a draft Last Will. Read this draft carefully!!
- D. **Report Any Noted Errors.** If you find errors, please report them.
- E. **Corrected Draft Returned.** We will send corrected draft by email. Repeat Step VI.C. above.
- F. **Draft Approved.** If you find no errors, send email telling us that.
- G. **Using IV.J. Co-Worker or Other Witness Procedure.** If you are using co-worker or other witnesses, you may sign you Last Will without further involvement by this office. Remember please checklist items below:

NOTE: Symbols below like  appear here and in the example Last Will, Part VII below..

- ☐ 01. **Except for the last page**, you must initial the bottom of each page of your Last Will. See 
- ☐ 02. You must date the last page of your Last Will. See 
- ☐ 03. On the last page, you must state where you were located when you signed. See 
- ☐ 04. You must sign the last page of your Last Will (page 2 in the example). See 
- ☐ 05. Your witnessess must be over age 18
- ☐ 06. Your witnessess must be California residents
- ☐ 07. Your witnessess must not be under legal incapacity (felon, conservator appointed, etc.)
- ☐ 08. Your witnesses must actually watch you sign your Last Will
- ☐ 09. Your witnesses must sign the last page of your Last Will, See  & 
- ☐ 10. On the last page, your witnesses must provide address, phone, & email. See  & 

H. Using IV.J. Attorney & Assistant Procedure

- ☐ 01. Call the office and make an appointment.
- ☐ 02. At the appointed time, bring your unsigned, approved draft Last Will to the office.
- ☐ 03. The office will attend to formalities. Less than 10 minutes.
For the duration of the virus stay at home orders, procedure will be outside at distance if weather permits.

I. Copy & Original

If you have selected original held by client (preferred), please hand deliver or u.s. mail a hardcopy of all pages of the original, or, better, please scan or photocopy the original, hold the original as you wish (inform someone!), and email or mail the copy of the original to the office. NOTE: The office agrees to retain any physical or PDF copy for two years only.

If you have selected original held by attorney, mail or better hand deliver the original to the office, retaining a physical or PDF copy for your records. NOTE: Attorney agrees to hold original and any physical or PDF copy for two years only.

THAT'S IT, WE'RE DONE! THANK YOU FOR YOUR SERVICE TO THE COMMUNITY.

VII. EXAMPLE LAST WILL OF CHARLEY CLIENT

I, Charley Client, being of sound mind and body, but mindful of the impermanence of life, do hereby declare this to be my Last Will & Testament. I revoke all prior Last Wills I have have written or signed at any time in the past.

Spouse. My spouse, domestic partner, "significant other", is: Spouse O. Client

Parents. I have living parents I wish to honor as follows:

Mother: Mom O. Client

Father: Dad O. Client

Descendants. I have living children and grandchildren as follows:

child: Kid1 O. Client

child: Kid2 O. Client

Non-Human Family Members. I have non-human family members I care for as follows:

Fido, our dog

PuddyTat, our cat

Executor. I nominate the following persons as executor of my estate, in order of preference among them:

1. My spouse
2. My children who have as of the date of my death attained the age of 18, acting jointly
3. Either of my parents
4. My best friend, Barry Buddy

Executor has all powers necessary or appropriate to facilitate administration. If this Last Will requires formal administration, the court is requested to expressly grant executor power to act under the IAEA. If not, such powers are hereby granted.

I nominate the following persons in my order of preference among them to serve as guardians of my minor children:

1. My Spouse,
2. My sister, Sis O. Client

Bond. If I initial here _____, my executor may serve without posting of bond.

Property To. After payment of my debts, if any, I leave my property, including property my estate acquires by reason of my death, to:

1. My spouse
2. My children

Non-Human Family Members. I request that the care of my non-human family members be entrusted to:

1. Good Friend 1, or
2. Good Friend 2.

I request that property of my estate be used to provide care for my non-human family members for so long as needed for a good home to be found, and thereafter if the need for that support continues.

Life Insurance. I have life insurance policies as follows:

- 1.
- 2.

Investment Accounts. I have bank and investment accounts as follows:

- 1.
- 2.

LAST WILL AND TESTAMENT OF CHARLEY CLIENT, page 1



TESTATOR INITIALS: _____

*** end of page ***

LAST WILL AND TESTAMENT OF CHARLEY CLIENT, page 2

L-2

IN WITNESS WHEREOF, I have hereunto set my hand this date: _____,
at _____, California.

R-1

L-3

X

Charley Client, testator

We, the witnesses, hereby affirm on the date indicated below
that the Testator named above did appear before us and
that the Testator named above did identify this document to be Testator's Last Will and Testatment, and
that, to the best of our knowledge, Testator was of sound and disposing mind, and, to the best of our knowledge,
that Testator was not acting under duress, menace, fraud, or misrepresentation of any person whomsoever,
that Testator was not acting under the undue influence of any person whomsoever,
that Testator and each of us were at that time over the age of 18,
that Testator did ask each of us to witness Testator's signature of this document,
that Testator did then sign, or acknowledge Testator's prior signature on, this document in the presence of all of us,
and that all of us, immediately thereafter in the presence of one another and of the Testator, thereupon signed this
document as witnesses.

We declare under penalty of perjury that the foregoing is true and correct.

WITNESS

ADDRESS & TELEPHONE

L-4

1.

R-2

L-5

2.

R-3