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Client Name: _____

How did you hear about us? _____

ALL INFORMATION IS STRICTLY CONFIDENTIAL

MAILING/BILLING ADDRESS	
Street Address / P.O. Box:	
City:	State:
Zip:	County:

YOUR PERSONAL INFORMATION		
Full Legal Name:		
<input type="checkbox"/> M <input type="checkbox"/> F	Date of Birth:	Country of Citizenship:
Occupation:	Employer:	
Home Phone:	Cell Phone:	
E-mail:		
Marital status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed		Date of Marriage:

What type of payment do you plan on using? Underline One: VISA, Mastercard,
Discover, Check
NAME ON CARD: _____

BILLING STREET ADDRESS:
(If different from above) _____

BILLING CITY, STATE, ZIP: _____

CARD NUMBER: _____

CARD EXPIRATION DATE: _____

CVV CODE (3 digit code on back): _____

WARNING! ONLY SIGN THIS TRUST IF IT ACCOMPLISHES YOUR INTENT. THIS UNIQUE TRUST IS AN ATTORNEY-PREPARED TRUST PROVIDED TO OUR CLIENTS TO ASSIST IN PLANNING FOR CERTAIN FIREARMS AND RELATED ITEMS. THIS TRUST DESIGN INTENTIONALLY PROVIDES ONLY A LIMITED NUMBER OF CUSTOMIZATIONS TO KEEP THE COST DOWN. DISCUSS CUSTOMIZATION SERVICES WITH ONE OF OUR ATTORNEYS.

NAME OF TRUST: _____ **TRUST**

DATE TO BE SIGNED: _____

CHECK ONE:

Creation of New Trust

Grantor: _____

Initial Trustee
(usually yourself): _____

Restatement of Existing Trust

Original Trust Date: _____

Grantor: _____

Original Trustee: _____

Current Trustee: _____

FAMILY INFORMATION

CHECK ONE:

I am not now married.

I am married and my spouse's name is _____. Any reference in this agreement to "my spouse" is a reference to this person.

CHECK ONE:

I have no children.

I have children and their names are:

SUCCESSOR TRUSTEE INFORMATION

In the event of your death or incapacitation, who would you want to take over managing your trust assets?

1. _____; then
2. _____; then
3. _____; then

Then, additional backup successors are appointed in your trust as follows:

- Disability: the Trustee of your revocable living trust OR
 the Agent named in your General Durable Power of Attorney or your
 Guardian appointed by a Court.
- Death: the Trustee of your revocable living trust OR
 the Personal Representative nominated in your Will or as appointed by a
 Court should you die without a Will.

DISTRIBUTIONS AT DEATH

#1: SPECIFIC GIFTS OF ONE OR MORE FIREARMS

We provide you with a blank tangible personal property memorandum which you may use with your trust to identify and gift specific items *of tangible personal property owned by this trust only* to specific individuals. You can change this memorandum by executing a new one and signing and dating it, without having to amend your trust.

#2: DISTRIBUTION OF REMAINING TRUST ASSETS TO SPOUSE (IF APPLICABLE)

All to spouse, any disclaimed assets by percentage to one or more beneficiaries named in exhibit 2.

_____ Percent to spouse, all remaining and any disclaimed assets by percentage to one or more beneficiaries named in Exhibit 1.

The spouse will be listed in Exhibit 1 and the distribution to the spouse will be by percentage along with other beneficiaries listed in Exhibit 1.

None of the remainder assets will be distributed to the spouse

#3: REMAINING TRUST ASSETS PASS BY PERCENTAGE

All other items pass by percentage to one or more beneficiaries named in Exhibit 1.

#4: REMOTE CONTINGENT BENEFICIARIES

If #3 fails, as beneficiaries are unable or unwilling to accept your bequest, then you may create a backup plan. The default remote contingent beneficiary plan uses the state of intestacy, i.e. assets are distributed to those who would inherit by law without an estate plan. If you wish to change this please contact our office and we will quote a fee to do so.

REQUIRED EXHIBITS & SCHEDULES

The following Exhibits and Schedules are required to complete your GunDocx™ Trust. Failure to complete both Exhibits or to provide a Schedule A and B may cause your trust to be returned by the BATFE as incomplete.

Exhibit 1 identifies the persons or entities to receive a portion of the remainder of trust assets after satisfying any specific gift. The remainder interest must add up to 100%.

Schedule A is a Schedule of National Firearms Act Assets (if any).

Schedule B is a Schedule of Non-NFA Assets. This Schedule can be customized for privacy.

Your trust transfers and conveys \$10 in cash and also other assets to “fund” your trust, making it legally effective on the date signed by you as Trustmaker and as Trustee. An assignment of **non-NFA** firearms and firearms accessories is also provided for your convenience and as additional documentation.

Transfers of **NFA firearms** require a BATFE approved transfer in order to become trust property or to be distributed from the trust to any other person or entity.

REMAINDER BENEFICIARY WORKSHEET

We provide you with a personal property memorandum which allows you to leave specific items to specific people. The remainder beneficiaries receive all assets that are left over after the specific gifts are made. If nothing is left over, then they get nothing. Please list a beneficiary and the percentage of trust assets they are to receive.

Name	Relationship	Share
_____		_____ %
_____		_____ %
_____		_____ %
_____		_____ %
_____		_____ %
_____		_____ %
_____		_____ %
_____		_____ %
_____		_____ %
_____		_____ %
_____		_____ %
TOTAL		100%