



**Wills for Heroes**  
**Information Packet**  
**September 2011**

# MARYLAND STATE FIREMEN'S ASSOCIATION

*Representing the Volunteer Fire, Rescue and Emergency Medical Services Personnel*

*[www.msfa.org](http://www.msfa.org)*



## WILLS FOR HEROES PROGRAM FACT SHEET

As one of the benefits provided to qualified members of our member companies the Maryland State Firemen's Association has implemented a Wills for Heroes Program.

The Wills for Heroes Program is intended to provide the opportunity for those who qualify who wish to participate to have the Maryland State Firemen's Association provide such qualified participant with a free last will and testament.

The Wills for Heroes Program is not intended to be a substitute for an individual's estate planning as more particularly described on the advice of rights and disclaimer.

Attached to this fact sheet you will find a set of documents which include a facsimile the last will and testament, advice of rights and disclaimer, privacy rights notice, information sheet and Wills for Heroes Document for your information. Copies of each of the documents are also available on the Maryland State Firemen's Association website ([msfa.org](http://msfa.org)).

**MARYLAND STATE FIREMEN'S ASSOCIATION**  
**WILLS FOR HEROES PROGRAM**  
**PRIVACY RIGHTS NOTICE**

The Maryland State Firemen's Association does not maintain records of persons who participate in the program or the information given to the Maryland State Firemen's Association representatives regarding participation in the program. All information supplied by an individual participating in the program will be used solely for the purpose of the program. No information will be shared or sold with any other person, firm or corporation. Upon the participating individuals having executed a last will and testament the sole purpose of the program being to provide such last will and testament to a qualified participating individual, all information received from that individual for the purpose of preparing the last will and testament will be returned to the individual and no copies or records will be kept for any reason or any purpose by the Maryland State Firemen's Association.

**MARYLAND STATE FIREMEN’S ASSOCIATION**  
**WILLS FOR HEROES PROGRAM**  
**ADVICE OF RIGHTS AND DISCLAIMER**

This advice of rights and disclaimer by and between the Maryland State Firemen’s Association and \_\_\_\_\_

WITNESSETH

WHEREAS, the Maryland State Firemen’s Association has undertaken to provide without charge certain last wills and testaments of limited scope to qualified firefighters in the State of Maryland and,

WHEREAS, related to the “wills for heroes” program, an individual qualified firefighter wishing to take advantage of the free last will and testament makes such election with knowledge of the limitations in the scope of the program,

NOW THEREFORE, the parties hereto agree

FIRST; that the wills for heroes program is not intended to act as a solicitation by the Maryland State Firemen’s Association for any additional legal or estate planning services.

SECOND; that the wills for heroes program is not intended to be a substitute for legal or estate planning services which the signatory acknowledges are of such a nature as should be inquired into independently.

THIRD; that the wills for heroes program provides a “simple” last will and testament only and no further or additional estate planning services the nature of which should be sought by the undersigned by a qualified attorney of his choice should the undersigned so desire.

FOURTH; that the wills for heroes program is provided as a benefit to qualified individuals as a benefit of membership in a member company of the Maryland State Firemen’s Association.

FIFTH; a qualified individual is a member in good standing of a volunteer fire rescue or EMS company which is itself a member in good standing of the Maryland State Firemen’s Association.

SIXTH; The Maryland State Firemen’s Association disclaims any duty or responsibility to provide estate planning counseling beyond the terms and condition of the wills for heroes program.

AS WITNESS the hand and seal of the aforesaid individual this \_\_\_\_\_day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Witness

MARYLAND STATE FIREMEN'S ASSOCIATION  
WILLS FOR HEROES PROGRAM  
INFORMATION SHEET

Full Name: \_\_\_\_\_

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

Telephone Number: \_\_\_\_\_

Age: \_\_\_\_\_

Birth Date: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Spouses Full Name: \_\_\_\_\_

Spouses Birth Date: \_\_\_\_\_

Spouses Social Security Number: \_\_\_\_\_

Name(s) of Children and Birth Dates: \_\_\_\_\_

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Limitations on powers of person representative: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Waiver of Bond: : \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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Primary Beneficiary(s): \_\_\_\_\_

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Contingent Beneficiary(s): \_\_\_\_\_

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

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Nature of Funeral and Interment; Religious, Secular, Cemetery, and Marker for final resting place (?): \_\_\_\_\_

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Cremation: \_\_\_\_\_

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The following are for your future planning purposes only;

Identification of Property to be devised and bequeathed: \_\_\_\_\_

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Real Estate: Names of Owners, Family Home: \_\_\_\_\_

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Bank Accounts: Name of Bank, Owners of Account, Account Number(s): \_\_\_\_\_

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Investment Portfolio: Name of Brokerage, account number, owners names: \_\_\_\_\_

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Special Property: Numismatic and philatelic: \_\_\_\_\_

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Jewelry: \_\_\_\_\_

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China: \_\_\_\_\_

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Silver: \_\_\_\_\_

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Antiques: \_\_\_\_\_



# MARYLAND STATE FIREMEN'S ASSOCIATION

*Representing the Volunteer Fire, Rescue and Emergency Medical Services Personnel*

*www.msfa.org*



(Date)

(Participants name and address)

Re; Wills for Heroes Program Document

Dear (Name of participant),

Attached please find the completed last will and testament prepared for you under the auspices of the Maryland State Firemen's Association Wills for Heroes Program in the form and containing the substance you selected.

In order for the Will to be a valid last will and testament, there are certain requirements regarding the signing of the will which cannot be ignored.

Maryland State Law requires that at the time you sign the will you must sign the will in the presence of two witnesses who both witness your signing and who are witnesses to their respective signing as witnesses so that all three must participate in the signing of the will at the same time.

Thank you for participating in the Maryland State Firemen's Association Wills for Heroes Program.

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(President)

MSFA

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LAST WILL AND TESTAMENT  
OF

\_\_\_\_\_  
(Name)

I \_\_\_\_\_ of \_\_\_\_\_ County Maryland being of sound and disposing memory and disposition do hereby make, publish and declare this as and for my last will and testament hereby revoking any or all other wills and codicils heretofore made by me.

FIRST; I bequeath my soul to all mighty god my body to the ground to be \_\_\_\_\_ buried/cremated in accordance with the rites of \_\_\_\_\_ and direct my personal representative hereinafter named to pay all costs associated with my funeral and interment. I further direct my personal representative to select a suitable marker to denote my final resting place. My personal representative shall be entitled to carry out this directive without limitation or application to approval by any court for authority.

SECOND; I direct my personal representative to pay, compromise or deny any or all claims made against my estate within his sound discretion and without the necessity of application to approval by any court for any said discretionary termination. I further direct my personal representative to pay from the proceeds of my estate all costs of administration of my estate, inheritance taxes, and all other charges associated with the administration of my estate.

THIRD; I hereby give devise and bequeath all of the rest and residue of my estate of whatsoever kind and wheresoever situate real personal and or mixed unto my beloved husband/wife/designee\_\_\_\_\_. However, should my said husband/wife predecease me or should we die in a common disaster in which case for the purpose of administration of my estate it shall be conclusively presumed that he/she predeceased me, then, in that event, I hereby give, devise and bequeath all the rest and residue of my estate of whatsoever kind and wheresoever situate real, personal and/or mixed in equal shares unto \_\_\_\_\_. (Names of contingent beneficiaries should be stated).

FOURTH; I hereby nominate, constitute and appoint \_\_\_\_\_ as and for personal representative to of my estate and having trust and confidence of my said designee's ability to administer my estate and carry out all of my directives, I hereby direct that he/she shall be entitled to serve without a bond. My said personal representative shall be empowered to do any actor thing ordinary, necessary, usual or in accordance with the applicable statutes of the State of Maryland to fulfill his duties and carry out my directives as my personal representative.

IN WITNESS WHEREOF, I have here unto set my hand and seal this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_.

\_\_\_\_\_

Signature

SIGNED, SEALED, PUBLISHED and DECLARED by the above-named (Testor/testatrix) \_\_\_\_\_, as (his/her), \_\_\_\_\_ Last Will and Testament, in the presence of us, who at (his/her) \_\_\_\_\_ request, in (his/her) \_\_\_\_\_ presence, and in the presence of each other, have hereunto subscribed our names as witnesses.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address