DATAFORM INFORMATION FOR WILLS

PREVIOUS WILL: YES / NO If yes where is it held? HERE OR _____ **PERSONAL DETAILS** Full name: Town/City: _____ Occupation: ____ Email address: ____ Relationship status: MARRIED / FIANCE / PARTNER / SEPARATED / DIVORCED / NOT IN A RELATIONSHIP **FAMILY TREE** Current Spouse/Partner (if any) Children (if any) Age _____ Age _____ Age _____ Age _____ Age _____ Step-Children (if any) _____ Age _____ Other Parent: _____ 2. _____ Age _____ Other Parent: _____ 3. _____ Age ____ Other Parent: _____ 4. _____ Age _____ Other Parent: ____ 5. _____ Age _____ Other Parent: ____ **EXECUTOR(S) & TRUSTEE(S)** Trustee 1 full name Relationship Trustee 2 full name Relationship Back up Trustee(s)? YES / NO Back up Trustee full name _____ Relationship

Back	cup Trustee 2 full name		
Rela	tionship		
GUA	RDIAN(S) OF CHILDREN (IF ANY)		
Guar	rdian 1 full name		
Rela	tionship		
Guar	rdian 2 full name		
Rela	tionship		
CHA 1.	ITTELS – Who gets these? I give the following chattels: Item Item Item Item Item Item	tototo	
2.	I give all / all the rest of my chattels to		
 4. 	I give all / all the rest of my chattels to his/her/their discretion – the net sale pr	oceeds (if any) are to be added to	o residuary estate.
	<u>'S - Monetary</u>		
1.			
2.			•
3. 1			at age 20 or 25 years at age 20 or 25 years
4. 5.			at age 20 or 25 years
<u>CHA</u>	RITABLE GIFTS		
Full	I name of charity		Amount

SPECIAL CLAUSES						
	URVIVORSHIP: Please note jointly owned as _aw of Survivorship	ssets p	oass to the surviv	or on death		
DISTRIBU ⁻	TION/RESIDUARY ESTATE					
To survivin	g spouse partner					
OR						
To children	(list full names and ages): at age 18 / 20 / 2	21 OR a	at age 25			
Name(s) o	children					
Full name				Age		
	ur children dies before you do – do you want th	neir sha	are of your estate t	o go to your		
If no benefi	ciaries as stated above then how is your residua	ary esta	ate to be distribute	d?		
Number of	shares:					
Share	Full name		Relationship	Gift over their child?		
/			at age	YES/NO		

Share	Full name	Relationship	Gift over their child?
/		at age	YES / NO
/		at age	YES / NO
/		at age	YES/NO
/		at age	YES/NO
/		at age	YES/NO

CONTEMPLATION OF MA			revokes will on marriage	
UNERAL ARRANGEMEN	<u>ITS</u>			
wish to be: BURIED or	CREMATED			
Other funeral instructions	s:			
LIST OF MAIN ASSETS O		MAKER		
Property: Main House Pro	pperty			
Address of Property	Owner(s) name		Ownership	Approximate value \$
			Joint / Tenants in Commor	1
Property: Second House(s) and/or Rental		1	
Address of Property	Owner(s)		Ownership	Approximate
			Joint /	value \$
			Tenants in Commor	n
			Joint / Tenants in Commor	1
	nk Accounts:			
House Property:		☐ Trust Name: Inheritance or beneficiary in any other Trust:		
Rental Property:	ntal Property: ☐ Farm/Business/Commercial:			
Life Insurance Company: _		☐ Shares/B	onds/Cash:	
FURTHER EXPLANATION				