

PERSONAL INFORMATION

Date _____

(for Wills, Enduring Powers of Attorney and Personal Directives)

Complete Legal Name: _____

Age (date of birth): _____

Citizenship: _____

Full Address: _____

Occupation: _____

Place of Employment _____

Telephone # - home: () _____

- work: () _____

SPOUSE'S INFORMATION

Complete Legal Name: _____

Age (date of birth): _____

Citizenship: _____

Full Address: _____

Occupation: _____

Place of Employment _____

Telephone # - home: () _____

- work: () _____

MARTIAL STATUS

Current Status? (single, common law, engaged, married, separated, divorced, widow/widower)

Details: _____

Marriage Contract? Cohabitation Agreement? Divorce Settlement? Details?

Children? (age, mental/physical disabilities, martial status, addresses, grandchildren - their ages)

Details: _____

Will Instructions

1. Executor(s): (spouse, relative, friend, professional, trust company - address/phone #)

2. Alternate Executor(s):

3. Guardian(s):

4. Alternate Guardian(s):

5. Funeral Directions: (burial, cremation, pre-arranged)

6. Specific Bequest(s): (cash, chattels, land, shares etc - relationship and address of beneficiaries)

7. Residuary Bequest(s): (percentage, fixed amounts etc.- relationship and address of beneficiaries)

8. Alternate Residuary Bequest(s)

9. Trusts: (infants, mentally handicapped, spousal - age/time of distribution)

10. Total Family Demise: (relatives, friends, charities)

11. Administration Clauses: (limitations/powers)

12. Miscellaneous:

(i) Guardianship Clause? Yes _____ No _____

(ii) Notes:

Enduring Power of Attorney

1. Appointment: (single, joint - full names and addresses/phone #'s, relationship, survivor to carry on, panel replacement)

2. Comes into Effect: (springing, immediate, if springing who makes decision, specific doctor or two doctors practising in the Prov.)

3. Powers:

i) authority to do anything on my behalf

ii) authority to delegate

iii) other _____

4. Restrictions on Powers:

i) not subject to any restrictions _____

ii) subject to the following restrictions _____

iii) compensation for attorney

Personal Directive

1. Appointment of Agent(s) (spouse, other - full names, addresses/phone #'s, joint)

2. Appointment of Alternate Agent(s) (spouse, other - full names, addresses/phone #'s, joint)

3. Notes : (limitations, directives, etc.)

General Notes: