

SECTION 1

FAMILY INFORMATION

1. PERSONAL INFORMATION			
<i>Full Name</i>			
<i>Present Address</i>			
<i>Mailing Address (if different from above)</i>			
<i>Home Phone Number</i>	<i>Work Phone Number</i>	<i>Cell Phone Number</i>	<i>Fax Number</i>
<i>Email Address</i>			
<i>Date of Birth</i>		<i>Place of Birth</i>	
<i>Occupation</i>		<i>Employer</i>	
<i>Employer's Address</i>			
<i>Citizenship other than Canada (if any)</i>			
<i>Do you have a US Green Card?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No		<i>Do you Holiday in the US for extended periods each year?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	
2. SPOUSE'S INFORMATION			
<i>Full Name</i>			
<i>Present Address</i>			
<i>Mailing Address (if different from above)</i>			
<i>Home Phone Number</i>	<i>Work Phone Number</i>	<i>Cell Phone Number</i>	<i>Fax Number</i>
<i>Email Address</i>			
<i>Date of Birth</i>		<i>Place of Birth</i>	
<i>Occupation</i>		<i>Employer</i>	
<i>Employer's Address</i>			
<i>Citizenship other than Canada (if any)</i>			
<i>Do you have a US Green Card?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No		<i>Do you Holiday in the US for extended periods each year?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

3. MARRIAGE INFORMATION			
<i>Current Marital Status</i>			
<i>Date of Marriage</i>	<i>Place of Marriage</i>		
<i>Previous Marriage(s)?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Name(s) of Previous Spouse(s)</i>		
<i>Date(s) of Previous Marriage(s)</i>	<i>Place(s) of Previous Marriage(s)</i>		
<i>Date(s) of Separation/Divorce/Death</i>	<i>Obligations to previous marriage(s)?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No		
<i>If so, please provide details:</i>			
<i>If you are Single, Separated or Divorced:</i>	<i>Are you planning to marry in the near future?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No		
<i>Are you currently cohabitating with anyone?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Date of Cohabitation? (if applicable)</i>		
4. CHILDREN			
<i>Number of Children (if any)</i>	<i>Are all the children from your present marriage?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No		
<i>NOTE: If not all children are from your present marriage, please indicate the appropriate description (i.e. P = previous marriage, A = adopted, O= born outside of present marriage)</i>			
<input type="checkbox"/>	<i>Full Name</i>	<i>Date of Birth</i>	<i>Marital Status</i>
<i>Full Mailing Address</i>		<i>Names and Ages of Their Children</i>	
<input type="checkbox"/>	<i>Full Name</i>	<i>Date of Birth</i>	<i>Marital Status</i>
<i>Full Mailing Address</i>		<i>Names and Ages of Their Children</i>	
<input type="checkbox"/>	<i>Full Name</i>	<i>Date of Birth</i>	<i>Marital Status</i>
<i>Full Mailing Address</i>		<i>Names and Ages of Their Children</i>	

	<i>Full Name</i>	<i>Date of Birth</i>	<i>Marital Status</i>
<i>Full Mailing Address</i>		<i>Names and Ages of Their Children</i>	
	<i>Full Name</i>	<i>Date of Birth</i> <i>MM/DD/YYYY</i>	<i>Marital Status</i>
<i>Full Mailing Address</i>		<i>Names and Ages of Their Children</i>	
<i>If any stepchildren, adopted or illegitimate children of either you or your spouse, please provide details:</i>			
<i>If any of your grandchildren adopted, stepchildren or illegitimate, please provide details:</i>			
<i>If any of the children or grandchildren mentally or physically incapacitated, please provide details:</i>			
<i>Have any of your children predeceased you?</i>		<input type="checkbox"/> Yes <input type="checkbox"/> No	
<i>If so, please provide details</i>			
<i>Full Name</i>		<i>Date of Birth</i>	<i>Date of Death</i>
<i>Names and Addresses of Their Children</i>			

SECTION 2 – INSTRUCTIONS FOR WILL

5. PERSONAL REPRESENTATIVES		
<i>If your spouse is the sole beneficiary of your Estate, it may be preferable to name him/her as the primary Personal Representative. You should also name alternates, in the event your first choice is unable to act. For tax reasons, it is not advisable to choose a Personal Representative who resides outside of Canada. If you have more than one Personal Representative, it would be preferable if at least one of them is a resident of Alberta</i>		
PRIMARY PERSONAL REPRESENTATIVE		
<i>Full Name</i>	<i>Relationship</i>	<i>Age:</i>
<i>Full Mailing Address</i>		
ALTERNATE PERSONAL REPRESENTATIVES		
<i>Full Name</i>	<i>Relationship</i>	<i>Age:</i>
<i>Full Mailing Address</i>		
<i>Full Name</i>	<i>Relationship</i>	<i>Age:</i>
<i>Full Mailing Address</i>		
6. GUARDIAN(S) FOR MINOR CHILDREN		
PRIMARY GUARDIAN(S)		
<i>Full Name(s)</i>	<i>Relationship</i>	<i>Age:</i>
<i>Full Mailing Address</i>		
ALTERNATE GUARDIAN(S)		
<i>Full Name(s)</i>	<i>Relationship</i>	<i>Age:</i>
<i>Full Mailing Address</i>		

7. BENEFICIARIES

The following choices as to distribution of your Estates are for your convenience only. It is intended to get you thinking about the issues to be discussed with your lawyer.

All to spouse?

Yes No

Other:

If spouse predeceases you:

Equally to all children

All to children but different percentages to particular children

Other:

At what age are your children to receive their share of your Estate?

_____ % at _____ years _____ % at _____ years _____ % at _____ years

Other: _____

The age of majority in Alberta is 18. Unless specified otherwise, the Will shall be drafted so that your Personal Representative will hold each child's share in trust until the specified age with power to encroach on income and capital for education, maintenance and support.

If one child dies before you do, or before attaining the age at which they are entitled to the share, who shall receive that share or the amount remaining?

The children of the deceased child (your grandchildren)

Your surviving children only

Other: _____

How is your Estate to be divided if you and your spouse and all your children and grandchildren die in a common accident, or if any of your children or grandchildren survive you but die before becoming entitled to receive their entire portion of your Estate?

1/2 to my parents and 1/2 to my spouse's parents

1/2 to my brother and sisters and 1/2 to my spouse's brothers and sisters in equal shares

Charities: _____

Other: _____

ASSETS THAT DESIGNATE BENEFICIARIES

Any assets that designate beneficiaries (i.e. life insurance policies, pensions, etc.) may be changed by your Will. However, only the latest signed document takes effect.

Do you want your Will to make changes to your Pension or Insurance documents? Yes No

If so, please detail such desired changes:

SPECIFIED GIFTS OR LEGACIES

It may not be wise to list any items unless they are definitely valuable or of great sentimental value unless you are prepared to pay your lawyer to draft the will and change it when an item is sold or replaced.

<i>Item:</i>	<i>Beneficiary</i>	<i>Relationship</i>
<i>Item:</i>	<i>Beneficiary</i>	<i>Relationship</i>
<i>Item:</i>	<i>Beneficiary</i>	<i>Relationship</i>
<i>Item:</i>	<i>Beneficiary</i>	<i>Relationship</i>
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<i>Item:</i>	<i>Beneficiary</i>	<i>Relationship</i>
<i>Item:</i>	<i>Beneficiary</i>	<i>Relationship</i>
<i>Item:</i>	<i>Beneficiary</i>	<i>Relationship</i>

MONEY FOR GUARDIANS

If it becomes necessary for the guardians that you have names to look after and raise your minor children, will they receive:

- A lump sum of money to be paid to them to buy a larger house, to renovate their current house, to buy a larger vehicle etc. in order to accommodate your children. How much? _____*
- A monthly payment to be paid to them to assist with the additional monthly expenses that they will incur as a result of raising your children. How much? _____*
- Other: _____*

SECTION 3 – FINANCIAL INFORMATION

8. ASSETS	
<p><i>The purpose of this section is to provide us with sufficient information to assist you in planning your Estate and to ensure we include sufficient powers in your Will. It will also inform your Personal Representatives of all your assets to make sure they do not miss any. If there is insufficient space to answer any of the following questions, please list on a separate sheet of paper.</i></p> <p><i>Note: For each asset please indicate the ownership. J = owned jointly by husband and wife H = owned by husband W = owned by wife O = owned by husband and/or wife with some other person (please describe)</i></p>	
REAL ESTATE	
Principal Residence	Ownership
Municipal Address:	
Legal Description:	
Name(s) on Title:	
Ownership (Joint Tenancy / Tenancy in Common):	
Secondary Residence	Ownership
Municipal Address:	
Legal Description:	
Name(s) on Title:	
Ownership (Joint Tenancy / Tenancy in Common):	
Other Land	Ownership
Municipal Address:	
Legal Description:	
Name(s) on Title:	
Ownership (Joint Tenancy / Tenancy in Common):	
Interests in Mines and Minerals	Ownership
Please describe:	

BANK ACCOUNTS				
<i>Bank Name and Location</i>			<i>Ownership</i>	
<i>Bank Name and Location</i>			<i>Ownership</i>	
<i>Bank Name and Location</i>			<i>Ownership</i>	
DIGITAL CURRENCY				
<i>Description</i>			<i>Ownership</i>	
<i>Description</i>			<i>Ownership</i>	
<i>Description</i>			<i>Ownership</i>	
ONLINE TRADING ACCOUNTS				
<i>Description</i>			<i>Ownership</i>	
<i>Description</i>			<i>Ownership</i>	
<i>Description</i>			<i>Ownership</i>	
GUARANTEED INVESTMENT CERTIFICATES AND TERM DEPOSITS				
<i>Bank Name and Location</i>		<i>Maturity Date:</i>	<i>Ownership</i>	
<i>Bank Name and Location</i>		<i>Maturity Date:</i>	<i>Ownership</i>	
<i>Bank Name and Location</i>		<i>Maturity Date</i>	<i>Ownership</i>	
<i>Bank Name and Location</i>		<i>Maturity Date:</i>	<i>Ownership</i>	
LIFE INSURANCE POLICIES				
<i>Company:</i>	<i>Policy #</i>	<i>Value</i>	<i>Beneficiary</i>	<i>Ownership</i>
<i>Company:</i>	<i>Policy #</i>	<i>Value</i>	<i>Beneficiary</i>	<i>Ownership</i>
<i>Company:</i>	<i>Policy #</i>	<i>Value</i>	<i>Beneficiary</i>	<i>Ownership</i>
<i>Company:</i>	<i>Policy #</i>	<i>Value</i>	<i>Beneficiary</i>	<i>Ownership</i>
SEGREGATED FUNDS				
<i>Company</i>		<i>Value</i>	<i>Beneficiary</i>	<i>Ownership</i>
<i>Company</i>		<i>Value</i>	<i>Beneficiary</i>	<i>Ownership</i>
<i>Company</i>		<i>Value</i>	<i>Beneficiary</i>	<i>Ownership</i>
PENSION PLANS				
<i>Company</i>		<i>Beneficiary</i>		<i>Ownership</i>
<i>Company</i>		<i>Beneficiary</i>		<i>Ownership</i>
<i>Company</i>		<i>Beneficiary</i>		<i>Ownership</i>

REGISTERED RETIREMENT SAVINGS PLAN / REGISTERED RETIREMENT INCOME FUND			
<i>Financial Institution</i>	<i>Location</i>	<i>Beneficiary</i>	<i>Ownership</i>
<i>Financial Institution</i>	<i>Location</i>	<i>Beneficiary</i>	<i>Ownership</i>
<i>Financial Institution</i>	<i>Location</i>	<i>Beneficiary</i>	<i>Ownership</i>
<i>Financial Institution</i>	<i>Location</i>	<i>Beneficiary</i>	<i>Ownership</i>
DEBTS OWED TO YOU			
<i>Does anyone, including your children and members of your family, owe you money (i.e. Personal Loans, Promissory Notes, Mortgages etc)? If so, please provide details.</i>			
<i>Name</i>	<i>Type of Debt</i>	<i>Amount</i>	<i>Ownership</i>
<i>Name</i>	<i>Type of Debt</i>	<i>Amount</i>	<i>Ownership</i>
<i>Name</i>	<i>Type of Debt</i>	<i>Amount</i>	<i>Ownership</i>
<i>Name</i>	<i>Type of Debt</i>	<i>Amount</i>	<i>Ownership</i>
<i>If any of these amounts are to be forgiven, please provide details:</i>			
BUSINESS INTERESTS			
<i>Please describe any interests that you have in private companies, partnerships, sole proprietorships, etc.:</i>			
<i>Interest Type</i>			<i>Ownership</i>
<i>Interest Type</i>			<i>Ownership</i>
<i>Interest Type</i>			<i>Ownership</i>
<i>Interest Type</i>			<i>Ownership</i>
SHARES IN PUBLIC CORPORATIONS, MUTUAL FUNDS, BONDS AND DEBENTURES			
<i>Please describe shares in public corporations, mutual funds, bonds and debentures</i>			
<i>Note: Listing all shares in a portfolio if it changes regularly is not required)</i>			
<i>Interest Type</i>			<i>Ownership</i>
<i>Interest Type</i>			<i>Ownership</i>
<i>Interest Type</i>			<i>Ownership</i>
<i>Interest Type</i>			<i>Ownership</i>
<i>Interest Type</i>			<i>Ownership</i>

VALUABLE PERSONAL PROPERTY		
<i>Please list your valuable personal property (i.e. automobiles, mobile homes, boats, heirlooms, etc.), and where the property is located.</i>		
<i>Property</i>	<i>Location</i>	<i>Ownership</i>
<i>Property</i>	<i>Location</i>	<i>Ownership</i>
<i>Property</i>	<i>Location</i>	<i>Ownership</i>
<i>Property</i>	<i>Location</i>	<i>Ownership</i>
OTHER		
SAFETY DEPOSIT BOX		
<i>Location</i>	<i>Box Number</i>	<i>Ownership</i>
<i>Registered Name(s)</i>	<i>Location of Keys</i>	
<i>Location</i>	<i>Box Number</i>	<i>Ownership</i>
<i>Registered Name(s)</i>	<i>Location of Keys</i>	
<i>If you have any assets outside of Alberta, please describe.</i>		
<i>If you have any assets outside of Canada, please describe</i>		
<i>Please list any other assets that have not been listed above.</i>		

SECTION 4 – LIABILITIES

9. LIABILITIES		
<i>Creditor</i>	<i>Amount</i>	<i>Liability</i>
<i>Creditor</i>	<i>Amount</i>	<i>Liability</i>
<i>Creditor</i>	<i>Amount</i>	<i>Liability</i>
<i>Creditor</i>	<i>Amount</i>	<i>Liability</i>
<i>Creditor</i>	<i>Amount</i>	<i>Liability</i>
<i>Creditor</i>	<i>Amount</i>	<i>Liability</i>
<i>Creditor</i>	<i>Amount</i>	<i>Liability</i>
FUNERAL ARRANGEMENTS		
<i>Upon your death, what would you like done with your body?</i>		
<input type="checkbox"/> <i>Buried – Do you have a preference as to where you would like to be buried?</i> _____		
<input type="checkbox"/> <i>Cremated – Do you have any instructions as to what is to be done with your ashes?</i> _____		
<input type="checkbox"/> <i>Other:</i> _____		
<i>If you have already pre-arranged these matters, please provide the company's contact information:</i>		