DER EK V. SMOLUK Notary Public

250.374.2727

DATE:

Basic Will Instructions Checklist

PERSONAL PARTICULARS

Full Name:					
SIN No:					
Home Address:					
Home Telephone:					
Business Address:					
Business Telephone:					
Fax:					
Occupation:					
Date of Birth:					
Place of Birth:					
Marital Status: Married O	Single O	Widow(er) O	Divorced 🔾	Separated (Common-Law C
Contemplation of Marriage:_					
Date of Marriage:					
Name of Spouse:					
SIN No:					
Address: _					
Date of Birth:					
Place of Birth:					
Date of Divorce:					
Place of Divorce:					

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Executors (including alternation	ate):	
Name	Address	Date and Place of Birth
Children:		
Name	Address	Date and Place of Birth

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Other Intended Beneficia	aries:			
Name	Address		Date of Birth (If minors)	Relationship
Disabled beneficiaries:	yes 🔾	no 🔾		
Guardians (if known and				
Name		Address		Date and Place of Birth

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GENERAL ASSETS

(a) Type: i.e., residential, commercial, farm, condominium, tenantowned:
(b) Street Address(s):
Mortgages:
Furniture Ownership:
Interest in Business:
Stock (Private Company)