

LIDDELL LAW OFFICE

WILL QUESTIONNAIRE

Date: _____

Section 1 Family Information

Personal Information:

Full Name:

Spouse Name:

Maiden Name:

Maiden Name:

List any other names you are known by:

List any other names you are known by:

Occupation:

Occupation:

Employer:

Employer:

Marriage Information:

Marital Status:

Marital Status:

Do you have a Pre-Nuptial Agreement?

Do you have a Pre-Nuptial Agreement?

YES ___ NO ___

YES ___ NO ___

Previous Marriages: YES ___ NO ___

Previous Marriages: YES ___ NO ___

If yes, name of previous spouse and date of
(circle one) death/divorce/separation:

If yes, name of previous spouse and date of
(circle one) death/divorce/separation:

Obligations pursuant to previous marriages
(eg.spousal/child maintenance) YES ___ NO ___

Obligations pursuant to previous marriages
(eg.spousal/child maintenance) YES ___ NO ___

Children Information:

Full Name: _____
Date of Birth: _____
Address/Postal: _____
Phone: _____ Cel: _____
Occupation: _____

Full Name: _____
Date of Birth: _____
Address/Postal: _____
Phone: _____ Cel: _____
Occupation: _____

Full Name: _____
Date of Birth: _____
Address/Postal: _____
Phone: _____ Cel: _____
Occupation: _____

Full Name: _____
Date of Birth: _____
Address/Postal: _____
Phone: _____ Cel: _____
Occupation: _____

Full Name: _____
Date of Birth: _____
Address/Postal: _____
Phone: _____ Cel: _____
Occupation: _____

GUARDIAN for minor children: ?

Section 2 Financial information

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 executor(s) of all your assets to make sure they do not miss any. If there is insufficient space to answer any of the following sections, please list on a separate sheet of paper.

In the left margin, please indicate ownership of assets:

J- owned jointly by husband and wife

H- owned by husband

W- owned by wife

O – owned by husband and/or wife, jointly with a different person (please describe)

Real Estate:

Principal Residence:

Municipal Address: _____

Postal Code: _____

Phone number: Home: _____ Cel: _____ Work: _____

Legal Description: _____

Copy of Title provided? _____

Name(s) on Title: _____

Ownership: Joint Tenancy____ Tenancy in Common____

Life Insured? YES__NO__

Other Real Estate/Rental and/or Recreational Property:

Municipal Address: _____

Name(s) on Title: _____

Ownership: Joint Tenancy____ Tenancy in Common____

Municipal Address: _____

Name(s) on Title: _____

Ownership: Joint Tenancy____ Tenancy in Common____

TFSA/RRSP/RESP/RDSA:

Spouse #1

Do you hold any:

Tax Free Savings Accounts? YES___NO___ Beneficiary: _____

Registered Retirement Savings Plans? YES___NO___ Beneficiary: _____

Registered Education Savings Plans? YES___NO___ Beneficiary: _____

Registered Disability Savings Accounts? YES___NO___ Beneficiary: _____

Life Insurance? YES___NO___ Beneficiary: _____

Bank Accounts: _____

Spouse #2

Do you hold any:

Tax Free Savings Accounts? YES___NO___ Beneficiary: _____

Registered Retirement Savings Plans? YES___NO___ Beneficiary: _____

Registered Education Savings Plans? YES___NO___ Beneficiary: _____

Registered Disability Savings Accounts? YES___NO___ Beneficiary: _____

Life Insurance? YES___NO___ Beneficiary: _____

Bank Accounts: _____

DO YOU HAVE ANY JOINT ACCOUNTS WITH ANYONE OTHER THAN YOUR SPOUSE?

Spouse 1: Yes_____ No_____ Spouse 2: Yes_____ No_____

Debts owed to either of you:

Does anybody owe you money (e.g. personal loans, promissory notes, mortgages, agreements for sale?) YES___ NO___

Do any of your children owe you any money?
Should this loan be forgiven on your death, or
treated as an advance against their inheritance?

YES____ NO____

Further Details:

DIGITAL ASSETS (computer and digital passwords)

Computer, social media and other providers may require a Court Order to allow your Executor access to your digital assets. We strongly recommend that you maintain a record of any passwords that you use so that your Executor will have to access to your digital assets. My digital assets are maintained at: (examples). Please use back of page for more information.

Apple ID: _____
Facebook: _____
Hotmail Email: _____
Gmail email: _____
Shaw email: _____
Telus email: _____
Other email: _____
Banking:

Snapchat: _____
Instagram: _____
Spotify: _____

Any shopping passwords? Amazon, Walmart, etc.

Section 3 Personal Advisors

Funeral Arrangements and Specific Instructions:

Have you prearranged your funeral?

YES__NO__

Funeral Home Details:

Name: _____

Address: _____

Phone: _____

Organ Donation? _____

Section 4 Instructions for Will

Spouse #1: Do you currently have a Will? YES___NO___

Spouse #2: Do you currently have a Will? YES___NO___

Reason for a new Will? _____

Executor(s):

If your spouse is the sole beneficiary of your estate, it may be preferable to name him/her as a primary Executor. One primary and one alternate Executor will likely be sufficient, depending on your circumstances.

Full Name and Age: _____

Relationship: _____

Address/Postal: _____

Phone/Cell: _____

Occupation: _____

Full Name and Age: _____

Relationship: _____

Address/Postal: _____

Phone/Cell: _____

Occupation: _____

Alternate Executor(s):

Full Name and Age: _____

Relationship: _____

Address/Postal: _____

Phone/Cell: _____

Occupation: _____

Full Name and Age: _____

Relationship: _____

Address/Postal: _____

Phone/Cell: _____

Occupation: _____

Have all of your Executors been asked and are they willing to act? YES___NO___

Beneficiaries:

Please complete this section for any beneficiaries who are not already described in this questionnaire.

Name: _____

Address/Postal: _____

Age: Relationship: _____

Name: _____

Address/Postal: _____

Age: Relationship: _____

Name: _____

Address/Postal: _____

Age: Relationship: _____

Name: _____

Address/Postal: _____

Age: Relationship: _____

Name: _____

Address/Postal: _____

Age: Relationship: _____

Name: _____

Address/Postal: _____

Age: Relationship: _____

The following choices as to distribution of your Estate are for your convenience only. This is not a substitute for a full discussion with your lawyer.

All to spouse? YES___NO___

If spouse predeceases me: ___Equally to all children?

___All to children but different percentages?

___ Different percentages to particular children?

___ Other? _____

Family Demise:

How is your Estate to be divided if all of your beneficiaries predecease you?

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

___ 1/2 to my brothers and sisters and 1/2 to my spouse's brothers and sisters who are then alive in equal shares

___ to my nephews and nieces and my spouse's nephews and nieces in equal shares

___ charities _____

___ other _____

Specified Gifts or Legacies-list items or amounts.

(Caution: Do not list any items unless you feel they have sufficient value (whether monetary or sentimental) to justify paying your lawyer to redraft a will when an item is sold or replaced.)

Charitable Donations:

- _____
- _____

ENDURING POWER OF ATTORNEY

Please complete this section if you are giving instructions for an Enduring Power of Attorney:

Name of Attorney:

Name of Alternate Attorney:

Address/Postal:

Address/Postal:

Age: Relationship:

Age: Relationship:

Name of 2nd Alternate Attorney:

Address/Postal:

Age: Relationship:

Please specify whether any of the above are to be named "Jointly" with anyone.

Do you make regular charitable gifts or donations? _____

If so, do you wish your Attorney to continue making the gifts. _____

PERSONAL DIRECTIVE

Please complete this section if you are giving instructions for a Personal Directive:

Name of Agent:

Name of Alternate Agent:

Address/Postal:

Address/Postal:

Age: Relationship:

Age: Relationship:

Phone: _____, work: _____
Cell: _____

Phone: _____, work: _____
Cell: _____

Name of 2nd Alternate Agent:

Address/Postal:

Age: Relationship:

Phone: _____, work: _____, cel: _____

Please specify whether any of the above are to be named "Jointly" with anyone.

If you are naming different Attorneys/Agents under your Enduring Power of Attorney and Personal Directive, do you want your Agent under the Personal Directive to have final say with regard to expenses relating to your accommodation and personal expenses?
