



QUESTIONNAIRE FOR WILLS AND POWERS OF ATTORNEY

1. What is your full legal name? _____
2. What is your marital status? (circle: married, separated, divorced, single)
3. If you are married or separated but not divorced, what is your spouse's full legal name and date of birth?

NOTE: If you are separated from a former spouse, kindly provide us with a copy of your Separation Agreement or Court Order regarding same (scanned and e-mailed is ideal).

4. If you are unmarried now, do you intend to marry or re-marry in the foreseeable future? ____ Yes ____ No
If so, what is your future spouse's full name and date of birth?

5. Which testamentary documents are we drafting for you (check):
 - Last Will and Testament
 - Power of Attorney for Property (dealing with finances)
 - Power of Attorney for Personal Care (dealing with medical decisions to be made if you are incapacitated)

6. Who the will be the executor(s) and alternate executor(s) (administrators)? Please provide full legal names:

Primary Executor(s) _____

Alternate Executor(s) _____

7. Are the same persons to act regarding your property and personal care? ____ Yes ____ No

Are you naming the same alternate decision makers as in #6 above? ____ Yes ____ No

If no, please provide full legal names: _____

8. Who are your beneficiaries and what would you like each to receive?

Full Legal Name of Beneficiary	Inheritance (Amount/Percentage)	Alternate Beneficiary*

*Alternate Beneficiary: You can simply indicate "lineal descendants" and then if your beneficiaries were to predecease you, the share would then be passed to a beneficiary's lineal descendants to be split amongst them in equal shares. For example, if you have two children and one of them dies before you do leaving three children (your grandchildren), half your estate would go to your living child and the other half would be divided in three equal shares with one share going to each of your deceased child's children (your grandchildren). You do not have to do this. You may want the share of your deceased beneficiary to revert back to your Estate and have your surviving beneficiaries receive everything (in which case indicate "Estate"), or you can name a completely different person or charity to receive that share.

9. Are any of your beneficiaries under the age of 18 (minors)? Yes No
 If yes, list: _____
10. If you have minor beneficiaries, who will be their legal guardian until they reach 18?

11. If you have minor beneficiaries, do you want them to receive their inheritance at 18? Yes No
 If no, at what age(s) would they each receive their inheritance(s)? _____
12. Are any of your beneficiaries disabled in any way? Yes No
 If yes, list: _____
13. Do you have life insurance/TFASAs/RRIFs/RRSPs with named beneficiaries? Yes No
14. Do you own property outside of Canada? Yes No
15. Are you self-employed? Yes No
 If so, is your business incorporated? Yes No
 Do you own a holding company? Yes No

NOTE: If so, we recommend a Secondary Will to avoid including the value of your corporate shares in your personal estate so as to minimize probate and other expenses for your Estate. Do you intend for the same persons to be the Primary and Alternate Executors and Beneficiaries? Yes No

If no, who will take on those roles? (Please provide full legal names):

Executor(s) & Alternate(s): _____

Full Legal Name of Beneficiary	Inheritance	Alternate Beneficiary*

16. In your Power of Attorney for Personal Care (medical decisions), would you like wording confirming:

Do Not Resuscitate Orders Yes No

organ donation for medical transplant purposes: Yes No

organ donation for research purposes: Yes No

Notes/Questions: _____

For help with this form, call us at (519) 576-5760 or email daniella@breithauptlaw.ca or gail@breithauptlaw.ca

We will look forward to assisting you!