Sandrock McCrea Law Corporation

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Lindsey J.A. Sandrock Barrister & Solicitor

Wills Instruction Questionnaire

We ask that you complete this form as to your personal information before we meet. Please call us if you have any questions about completing this questionnaire. Please make sure to use full legal names for all people when filling out this questionnaire.

Please note that the questionnaire assumes that only British Columbia Law applies to you. If this is not the case it may be necessary for you to consult a lawyer in another jurisdiction about your Will. We would be pleased to assist you with seeking counsel in another jurisdiction. Unless expressly requested to do so, we do not check the names of the registered owners of assets.

There is a Wills Information Booklet available from our office or online at http://www.lmccrea.com/.

 \square No

□ Power of Attorney

□ Health Care Agreement

□ Single Will

□ Spousal	Will	(separate)
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□ Spousal Will (mirror)

Reviewed

Notes:

ID Scanned for each client

 \Box Yes

□ Yes

Part 1 - Client Information

Information About You

Full Legal Name:	
Address:	
Occupation (if retired please include former oc	cupation):
Date of Birth (dd/mm/yyyy)	Place of Birth:
Telephone:	_Email:
Information About Your Spouse/Part	ner
Full Legal Name:	
Address:	
Occupation (if retired please include former oc	cupation):
Date of Birth (dd/mm/yyyy)	Place of Birth:
Telephone:	_Email:
Your Marital Status	
□ Married □ Common-law Relationship □ Single □ Separated □	Divorced Didowed
Your Children The word "child" includes a child of your marn an adopted child. Please provide the following	
Full Legal Name	Age
1	
2	
3	

Part 2 - Financial Information

List Major Assets:

Are any of your assets located outside of British Columbia? \Box Yes 🗆 No

Part 3 – Will Instructions

Executors/Trustees

Who do you want to appoint as your Executor(s) and Trustee(s)? If appointing more than one person, please indicate whether Primary, Alternate or Joint.

Spouse□ Yes □ No

	Person # 1	Person # 2	Person # 3
Full Legal Name			
Address and Phone Number			
Occupation			
Relationship to you			
Capacity	 Primary Alternate Joint with others named 	 Primary Alternate Joint with others named 	 Primary Alternate Joint with others named

Appointment of Guardian(s) for infant children

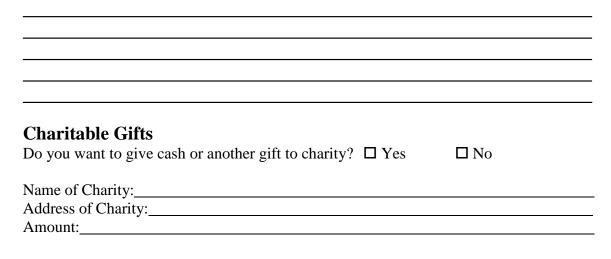
Do you have a child under age? \Box Yes \Box No Do you anticipate having children or more children? \Box Yes \Box No

Who is to be their guardian(s) should you die before they reach 19? If appointing more than one person, please indicate whether Primary, Alternate or Joint.

	Person # 1	Person # 2	Person # 3
Full Legal Name			
Address and Phone Number			
Occupation			
Relationship to you			
Capacity	 Primary Alternate Joint with others named 	 Primary Alternate Joint with others named 	 Primary Alternate Joint with others named

Specific Gifts

Do you want to leave a particular valuable asset such as real estate to a particular person?



Residue of Your Estate

This consists of the assets remaining in your Estate after payment of liabilities, taxes, specific gifts, legacies, etc.,

Spouse \Box Yes \Box No **Children** \Box Yes \Box No

□ Grandchildren in place of a deceased child□ Spouse in place of a deceased child

🗖 Per Capita	Per Stirpes
Definition: Only surviving children inherit	Definition: My trustee will divide the share
and no provision is made for a spouse of	among those descendants of my deceased
deceased child or children of a deceased	child equally according to the branches of
child.	the family, and not equally according to the
	number of persons.

□ If a child predeceases without children, residue to Surviving Children clause.

Wills Variation

□ Discussed

□ Not applicable

If your spouse/ partner or a child is not happy with what you leave him or her, a claim can be made under the Wills, Estates and Succession Act for a larger share of you Estate. If applicable, please prepare and give us a copy of a draft Memorandum setting out in as much detail as possible the reasons why you have excluded or limited the gifts to your spouse/partner or child and why he or she is neither in need or deserving. There are legal ways to avoid this problem such as by the careful use of joint tenancies or creation of a family trust.

If All Else Fails

Who do you want to receive your Estate if none of your primary intended beneficiaries (i.e. spouse/partner, children, grandchildren) live to inherit?

	Person # 1	Person # 2	Person # 3
Full Legal Name			
Address and Phone Number			
Occupation			
Relationship to you			
Date of Birth			

Please provide dates of birth for anyone under 19 years of age.

Funeral

Do you wish to be \Box Buried \Box Cremated

Do you have any specific wishes for your funeral or memorial service; and if you are being cremate, your ashes? \Box No

Prior Wills	□ Yes	□ No
If yes, location:		
Register Wills	□ Yes	□ No
If yes, location where		be kept:
. .		1

Part 4 – Other Matters

Enduring I	Power of Att	orney	□Yes	□ No
Spouse	□ Yes	□ No		
□ Normal	□ Benefit of	spouse only	□ Benefit of spouse	and children

If other than your spouse, please provide us with the information for the person(s) you wish to act as your attorney(s).

	Person # 1	Person # 2	Person # 3
Full Legal Name			
Address and Phone Number			
Occupation			
Relationship to you			
Date of Birth			

Health Care Representation Agreement

□ Section 7

□ Section 9

□ spouse

□ Spouse & Alternate

If other than your spouse, please provide us with the information for the person(s) you wish to act as your attorney(s).

	Person # 1	Person # 2
Full Legal Name		
Address and Phone Number		
Occupation		
Relationship to you		
Date of Birth		

Living Will

A living Will is available free of charge at http://www.lmccrea.com/.

Instructions to transfer joint property to tenants-in-common or common property to joint tenancy?_____