

**WILL INSTRUCTIONS**

**PERSONAL DETAILS**

FULL NAME(S): \_\_\_\_\_  
\_\_\_\_\_

ADDRESS & PHONE NO: \_\_\_\_\_  
\_\_\_\_\_

CHILDREN'S NAMES \_\_\_\_\_

AND DATES OF BIRTH: \_\_\_\_\_  
\_\_\_\_\_

DO YOU HAVE A MARRIAGE CONTRACT: YES: \_\_\_\_\_ NO: \_\_\_\_\_  
(If yes, provide copy)

DO YOU HAVE AN EXISTING WILL: YES: \_\_\_\_\_ NO: \_\_\_\_\_  
(If yes, provide copy if possible)

**EXECUTOR(S)**

NAME OF EXECUTOR: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

NAME(S) OF ALTERNATE EXECUTOR(S) \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

**GUARDIAN(S)**

NAME OF GUARDIAN: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

NAME OF ALTERNATE GUARDIAN(S): \_\_\_\_\_

ADDRESS: \_\_\_\_\_

BENEFICIARIES

- 1. To Spouse: \_\_\_\_\_
- 2. To Children if Spouse Predeceases? \_\_\_\_\_
- 3. Trust Fund for Children?: \_\_\_\_\_
- 4. Ages(s) For Children To Inherit: \_\_\_\_\_
- 5. Other Beneficiaries:  
(if no spouse or children): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 6. Specific Bequests: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

QUESTIONS/COMMENTS

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please complete and return to:

JOHN K.J. CAMPBELL  
Barrister & Solicitor  
208, 4245 - 97 Street  
Edmonton, Alberta T6E 5Y7

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