

Please answer the questions on this form and return in the post or to us at: <a href="mailto:hello@xyz.law">hello@xyz.law</a>

Your name:			Contact number:	
Date of birth:			Email address:	
Address:			Domicile (if known):	
Funeral wishes:				
Do you wish to donate organs:				
Personal representatives: (These are the people who will distribute your assets. You canchoose XYZ Law as a professional representative)		[Please provide names and addresses for personal representatives]		
Replacement representatives: (Replacements if the first representatives are not able to act for any reason)				
Guardians: (If you have children under 18 please name the adults you wouldlike to look after them in the event of your passing)		[Please provide names and addresses for guardians]		
<b>Replacement guardians:</b> (Replacements if the first guardiansare not able to act)				
Estimated value of property: (Residential and commercial)				
If you own property is it owned as		Joint Tenants or Tenants In Common?		
Estimated value of other assets: (Excluding property above)				
Gifts: (List all gifts of cash, properties and char, you wish to make. Y to consider any virtusuch as online bank heldelectronically, g networking account	itable donations fou may also wish ual assets you own accounts, shares aming and social	[Please provide names possible]	and addresses for recipients,	, and describe each gift in asmuch detail as
Residuary beneficiaries: (These are the people who willreceive the remainder of your assets after gifts)		[Please provide names and addresses for beneficiaries]		
Replacement benereceive the remaind beneficiaries are undor unwilling to recei	er ifyour first able			
Other information: (Any other important informationyou wish to add to your will)				