



Level 2, 12 Pirie Street, Adelaide
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INSTRUCTION SHEET
WILL

TO: Attention:
Telephone No: (08)

Facsimile No: (08)

FROM: Contact:

ABOUT YOU

FULL NAME:

DATE OF BIRTH:

RESIDENTIAL ADDRESS:

.....

CONTACT TELEPHONE:

OCCUPATION:

TRUSTEE – The person who is to manage your estate after your death e.g. spouse,
or someone who has good business sense and can be trusted

1. FULL NAME:

RESIDENTIAL ADDRESS:

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OCCUPATION:

RELATIONSHIP:

2. FULL NAME:

RESIDENTIAL ADDRESS:

.....

OCCUPATION:

RELATIONSHIP:

LIST OF FAMILY [Immediate family including step-children and children from previous relationship]

HUSBAND/WIFE:

CHILDREN:	Full Name	Age	Relationship
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GENERAL ASSETS [Note: How is any real property held ie jointly or as tenants in common – if you are not sure check with the Certificate of Title]

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SPECIFIC BEQUESTS [e.g. car, jewellery, furniture, cash etc]

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DISTRIBUTION OF ESTATE

1.
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IF CHILDREN PREDECEASE YOU – DO YOU WANT THEIR SHARE TO GO TO THEIR CHILDREN?

YES / NO

AND IF (1) CANNOT APPLY, THEN TO WHOM:

2.
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AT WHAT AGE ARE CHILDREN TO INHERIT? [e.g. 18]:

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ARE ANY FAMILY MEMBERS DELIBERATELY OMITTED?

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PREFERENCE OF BURIAL OR CREMATION:

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PREFERRED GUARDIANS IF CHILDREN UNDER 18 YEARS:

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This form does not constitute advice and is not a substitute for a personal interview which is required to execute a valid Will