

Please click 'File Save As' to make sure you can save a copy of your form before completing.

## Change of Will and Power of Attorney Client Questionnaire

1. Name :

2. Address :

Phone No :

Email :

3. Date of original Will :

4. Which clauses in original Will and the Powers of Attorney need to be changed?

5. What is the change?

6. Why are these changes being made?





11. Has there been any material change in your financial situation since you signed your last Will?

12. Did you change the ownership of any of your assets since you signed your last Will?

Please Save your Form before Submitting

