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## ESTATE INFORMATION FORM

### GENERAL

Name on Will:

Also known as:

Address:

Social Insurance #:

Date of Birth:

Last Occupation:

Place of Death:

Date of Death:

Date of Will:

Date of Codicil (add on to will):

Marital Status at the Date of Death:

Name of Spouse:

Date of Marriage:

Last name at birth:

Details of any marriage contract:

Did the deceased marry after date of will?

Was a marriage of the deceased terminated after date of will?



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## EXECUTORS

1. **Name:**

**Address:**

**Occupation:**

**Email:**

2. **Name:**

**Address:**

**Occupation:**

**Email:**

3. **Name:**

**Address:**

**Occupation:**

**Email:**



# MIRSKY • PASCOE

LAWRENCE S. PASCOE, B. COMM., LL.B. • MEMBER OF THE FAMILY LAW COLLABORATIVE NETWORK

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## BENEFICIARIES

Beneficiary	Name	Address	Is beneficiary under 18 years of age?	Is beneficiary mentally incapable under Substitutions Act?
1				
2				
3				
4				
5				
6				



BARRISTERS SOLICITORS NOTARIES

2039 Robertson Road Suite 300 Bells Corners Ottawa, Ontario K2H 8R2 (613) 828 - 2120 Fax (613) 596 - 0881

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## DEPENDANTS

**Previous Marriage:**

**Dependant Children**

(date of birth,  
addresses, SIN #  
if they have one):

**Documents to produce:**

- Will
- List of assets, debts and benefits
- Insurance policies
- Death Certificate
- Birth Certificate
- Marriage Certificate
- Social Insurance Number
- Last tax return
- Deed(s)

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