

WILL INFORMATION FORM

1. Personal Information	l				
Full Name					
ID Number					
Email					
Cell					
Spouse Name					
Spouse ID/DOB					
Dependents					
Name	ID/DOB	Relationship			
		•			
2. Will Status					
Do you have a Will? Yes □ N	[о □				
Last updated:					
2 Distribution of					
3. Distribution of your E					
Beneficiary Name	Relationship	Percentage / Allocation			
4. Assets & Liabilities					
Movable Property (Bank accounts, investments, vehicles, etc.):					
Movable 1 Toperty (Dank accounts, investinents, vehicles, etc.):					
Immovable Property (Homes, farms, etc.):					
Retirement Funds / Policies:					
Liabilities (Home loans, personal loans, suretyships, etc.):					

5. Specific Bequests	
6. Last Wishes Burial Type Preferred: Buried □ Cremated □	□ Organ Donor □ Living Will □
Details (Place of burial/cremation, religious/	cultural rites, etc.):
7. Executor Appointment	
Do you wish GIB Financial Services to be the	executor of your estate? Yes □ No □
Executor Fee: Standard Tariff (3.5% + 6%) \Box	Agreed Fee under GIB Legacy Protection Plan
Executor/Co-executor Name	Relationship
8. Testamentary Trust Do you wish to create a Testamentary Trust? Termination: Beneficiary Age OR Date Co-trustee Name	
Go trustee wante	rectationship
9. Guardianship for Minors Guardian Name	Relationship
Alternate Guardian(s):	
10. Business & Digital Assets Business Interests (Companies, partnerships	, shares):
Digital Assets (Social media, online accounts,	crypto, etc.):

11. Special Circumstances	
Foreign assets requiring separate will? Yes \square $\:$ No \square	
Previous marriages / divorce orders / maintenance obligations:	
Dependants with special needs:	

12. Witnesses

Witness Name	ID Number	Signature