**WILLS WEEK**

**Information Needed for Free Will**

Your name: ……………………………………………………………………….

ID Number: ……………………………………………………………………….

Spouse’s name: ………………………………………………………………….

ID Number: ……………………………………………………………………….

Married in or out of community

of property: ………………………………………………………………………..

Beneficiaries:

(If the benefits that a beneficiary is to receive are too many to note in this form they may be listed in an annexure hereto)

Name and ID Number: ………………………………………………………

Bequeathal (what the beneficiary is to

Inherit from your estate): ……………………………………………………

Name and ID Number: ………………………………………………………

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Name and ID Number: ………………………………………………………

Bequeathal (what the beneficiary is to

Inherit from your estate): ……………………………………………………

Name and ID number of person nominated as Executor:

……………………………………………………………………………….…..

Is the above person related to you? ………………….

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed

TESTATOR

Completed and signed on the \_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2024