



LEGAL WILL KIT



LAST WILL &
TESTAMENT KIT



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LAST WILL AND TESTAMENT

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of

(Full Names and Surname)

Presently of _____,

City Province

1. Declaration

1.1 I hereby declare that this is my last Will and Testament (*hereinafter referred to as the “Will” or my last “Will”*) and that I hereby revoke, cancel and annul all wills and codicils previously made by me either jointly or severally. I declare that I am of legal age to make this Will and of sound mind and that this last Will and Testament expresses my wishes without undue influence or duress.

2. Family Details

2.1 I am married to _____ (*hereinafter referred to as my “Spouse”*).

2.2 I have the following children:

Name: _____ Date of Birth _____

Name: _____ Date of Birth _____

Name: _____ Date of Birth _____

(the above listed children include any children of mine that are subsequently born or legally adopted and *shall hereinafter be referred to as my “Children” or “Child” wherever context so requires*).

3. Appointment and Powers of My Executors

3.1. I hereby nominate, constitute and appoint _____ as my sole Executor of this Will or if this Executor is unable or unwilling to serve then I appoint _____ as alternate Executor. (*hereinafter referred to as my “Executor” the term “Executor” in this Will is synonymous with and includes the term “Executrix” and includes singular or plural number, masculine or feminine gender*).

3.2. I hereby direct that my Executor shall not be required to furnish security and shall serve without any bond.

3.3 I hereby give and grant my Executor all powers and authority as are required or allowed by law with respect to my estate in the following duties. These powers are in addition to any powers conferred by law or by other provisions of this Will and may be exercised as and when required without application to or prior approval of any court of law:

a. I hereby direct my Executor to pay my debts, expenses of last illness, funeral expenses, costs of administration, and claims allowed in administration of my estate from the principal of my residuary estate according to all applicable laws.

b. To establish the probate of my Will as soon as possible after my death to take any legal action if necessary as a last resort under the laws of the Province of _____ .

- c. Pending the distribution of my estate my Executor shall have authority to carry on any business, venture or partnership in which I may have any interest at the time of my death.
- d. My Executor shall have full and absolute power in his/her discretion to sell all or any assets of my estate, whether by public auction or private sale and shall be entitled to let any property in my estate on such terms and conditions as may be acceptable to my beneficiaries.
- e. My Executor shall have authority to borrow money for any purpose connected with the liquidation and administration of my estate and to that end may encumber any of the assets of my estate.

4. Guardian

4.1. Failing the survival of my spouse as natural guardian I appoint _____ or failing him / her I appoint _____ to be the legal Guardian of my minor children named:

until such time as they attain the age of _____ years.

4.2. I direct that my nominated Guardian shall not be required to furnish security for acting in that capacity.

5. Disposition of Property

5.1 Specific Bequests

The following specific bequests shall be made from my estate in accordance with this Will. If the understated beneficiaries or beneficiary predeceases me the bequest shall be distributed along with the residuary estate:

1. _____ shall be bequeathed to
_____ Resident of _____.
2. _____ shall be bequeathed to
_____ Resident of _____.
3. _____ shall be bequeathed to
_____ Resident of _____.

4. _____ shall be bequeathed to
Resident of _____.
5. _____ shall be bequeathed to
Resident of _____.
6. _____ shall be bequeathed to
Resident of _____.
7. _____ shall be bequeathed to
Resident of _____.
8. _____ shall be bequeathed to
Resident of _____.
9. _____ shall be bequeathed to
Resident of _____.
10. _____ shall be bequeathed to
Resident of _____.

5.2. Digital Assets

My executor shall have the power to access, handle, distribute and dispose of my digital assets. For the purposes of this Will Digital assets includes but is not limited to files stored on my digital devices, including but not limited to, desktops, laptops, tablets, peripherals, storage devices, mobile telephones, smartphones, and any similar digital device which currently exists or may exist as technology develops or such comparable items as technology develops. The term “digital assets” also includes but is not limited to emails received, email accounts, digital music, digital photographs, digital videos, software licenses, social network accounts, file sharing accounts, financial accounts, domain registrations, DNS service accounts, web hosting accounts, tax preparation service accounts, online stores, affiliate programs, other online accounts and similar digital items which currently exist or may exist as technology develops or such comparable items as technology develops, regardless of the ownership of the physical device upon which the digital item is stored.

5.2 (a). I authorize my executor to engage _____ to assist in accessing, handling, distributing and disposing of my digital assets.

5.2 (b). All my digital assets shall be distributed in accordance with Schedule A of this Will attached herewith. In addition, I have prepared a memorandum with instructions concerning my digital assets and their access, handling, distribution and disposition. I direct my Executor and beneficiaries to follow my instructions concerning my digital assets and the memorandum is hereby incorporated with reference to this Will and shall be distributed to the Executor appointed in this Will.

5.3. Remaining Tangible Personal Property

I direct my Executor to distribute my remaining tangible personal property to _____ Resident of _____. If this beneficiary predeceases me then this property shall be distributed along with my residuary estate.

5.4. Residuary Estate

I direct my Executor to distribute all my residue property, both real and personal, of whatever nature and wherever situated, assets, including all real and personal property, tangible or intangible in the following percentages to the beneficiaries stated below. If any beneficiary predeceases me the property shall be proportionately distributed to the other remaining beneficiaries listed below:

_____ %	_____ Resident of _____
_____ %	_____ Resident of _____
_____ %	_____ Resident of _____
_____ %	_____ Resident of _____
_____ %	_____ Resident of _____
_____ %	_____ Resident of _____

6. Special Requests

I hereby state that in addition to specific bequests and directions given to my Executor, it is my desire to include the following as my final special wishes:

7. General Provisions

7.1. Words signifying one gender shall include the others and words signifying the singular shall include the plural and vice versa where appropriate.

7.2. Should any provision of this will be judged by an appropriate court of law as invalid it shall not affect any of the remaining provisions whatsoever.

7.3 For the purposes of distribution of property under this Will, no person should be presumed to survive me unless that person is surviving on the thirtieth day after the date of my death.

7.4. If there is an omission in this Will to leave any property to one or more of my heirs as named above, the failure to do so shall be deemed as intentional.

7.5. If the value of my estate is insufficient to complete all the bequests stipulated herein, then I give my Executor full authority to decrease each bequest by a proportionate amount.

7.6 If any beneficiary under this will contests in any court any of the provisions of this Will, then each and all such persons shall not be entitled to any bequests, or benefits under this Will and such interest or share in my estate shall be disposed of as if that contesting beneficiary had not survived me.

SELF-PROVING AFFIDAVIT

State of _____

County of _____

I / We, _____, _____ and _____ whose names are signed to the foregoing instrument, being first duly sworn, do hereby declare to the undersigned authority that the testator in the presence of witnesses signed and duly executed the instrument as his/her last Will and that he/she signed willingly, and that he/she executed it as his/her free and voluntary act for the purposes therein expressed, and that each of the individuals, in the present were at the time eighteen (18) or more years of age, of sound mind and under no constraint or undue influence.

Signed on this _____ day of _____ 20____ at this location
_____ in the presence of the undersigned witnesses.

Testator's Signature

Testator's Printed Name

Witness 1.

Name: _____

Address: _____

Signature: _____

Witness 2.

Name: _____

Address: _____

Signature: _____

As witnesses we declare that we are of sound mind and of legal age to witness a will and that to the best of our knowledge _____, the creator of this will, is of legal age to make a will, appears to be of sound mind and signed this will willingly and free of undue influence or duress. We declare that he / she signed this will in our presence as we then signed as witnesses in his / her presence and in the presence of each other witness, all being present at the same time.

Under penalty of perjury we declare these statements to be true and correct on this

_____ day of _____ 20__

at this location _____.

SUBSCRIBED, SWORN TO AND ACKNOWLEDGED before me on the _____ day of _____, _____ by the Testator/Testatrix and the witnesses, whose names are subscribed above.

Seal and Expiration Date Signature of Notary Public

LIVING WILL DECLARATION OF _____.

To my family, doctors, hospitals, surgeons, medical care providers, and all others concerned with my care:

I, _____, being of sound mind and rational thought, willfully and voluntarily make this declaration to be followed if I become incompetent or incapacitated to the extent that I am unable to communicate my wishes, desires and preferences on my own.

This declaration reflects my firm, informed, and settled commitment to refuse life-sustaining medical care and treatment under the circumstances that are indicated below.

This declaration and the following directions are an expression of my legal right to refuse medical care and treatment. I expect and trust the above-mentioned parties to regard themselves as legally and morally bound to act in accordance with my wishes, desires, and preferences. The above-mentioned parties should therefore be free from any legal liabilities for having followed this declaration and the directions that it contains.

DIRECTIONS

1. I _____ direct my attending physician or primary care physician to withhold _____ or withdraw life-sustaining medical care and treatment that is serving only to prolong the process of my dying if I should be in an _____ incurable or irreversible mental or physical condition with no _____ reasonable medical expectation of recovery.
2. I _____ direct that treatment be limited to measures which are designed to keep me comfortable and to relieve pain, including any pain which might occur from the withholding or withdrawing of life-sustaining _____ medical care or treatment.
3. I _____ direct that if I am in the condition described in item 1, above, it be remembered that I specifically **do not** want the following forms of medical care and treatment:

- A. _____
- B. _____
- C. _____
- D. _____
- E. _____
- F. _____
- G. _____
- H. _____
- I. _____
- J. _____
- K. _____

4. I direct that if I am in the condition described in item 1, above, it be remembered that I specifically **do** want the following forms of medical care and treatment:

- A. _____
- B. _____
- C. _____
- D. _____
- E. _____
- F. _____
- G. _____
- H. _____
- I. _____
- J. _____
- K. _____

5. I direct that if I am in the condition described in item 1, above, and if I also have the condition or conditions of _____, that I receive the following medical care and treatment:

This Living Will Declaration expresses my firm wishes, desires, and preferences and the fact that I may have executed a form specified by the law of the State of _____, may not be used a limiting or contradicting this Living Will Declaration, which is an expression of both my common law and constitutional rights.

I make this Living Will Declaration the _____ day of _____, 20____.

Declarant's Signature

Declarant's Address

WITNESS STATEMENTS

I declare that the person who signed or acknowledged this document is personally known to me, that he/she signed or acknowledged this Living Will Declaration in my presence, and that he/she appears to be of sound mind and under no duress, fraud, or undue influence.

Witnesses' Signature

Witnesses' Printed Name

Witnesses' Address

I declare that the person who signed or acknowledged this document is personally known to me, that he/she signed or acknowledged this Living Will Declaration in my presence, and that he/she appears to be of sound mind and under no duress, fraud, or undue influence.

Witnesses' Signature

Witnesses' Printed Name

Witnesses' Address

NOTARISATION

STATE OF _____, COUNTY OF _____

Subscribed and sworn to before me his _____ day of _____, 20____.

Signature of Notary Public

My commission expires: _____

Schedule A

Specific Bequests Digital Assets

Name of Executor _____, City _____,
State/Province _____.

Name of person nominated to assist Executor in distribution of digital
assets _____, City _____,
State/Province _____.

1. Name of Digital Asset: _____

Where/How to access: _____

Username: _____, Password: _____

Additional Information: _____

2. Name of Digital Asset: _____

Where/How to access: _____

Username: _____, Password: _____

Additional Information: _____

3. Name of Digital Asset: _____

Where/How to access: _____

Username: _____, Password: _____

Additional Information: _____

4. Name of Digital Asset: _____

Where/How to access: _____

Username: _____, Password: _____

Additional Information: _____

5. Name of Digital Asset: _____

Where/How to access: _____

Username: _____, Password: _____

Additional Information: _____

6. Name of Digital Asset: _____

Where/How to access: _____

Username: _____, Password: _____

Additional Information: _____

7. Name of Digital Asset: _____

Where/How to access: _____

Username: _____, Password: _____

Additional Information: _____

8. Name of Digital Asset: _____

Where/How to access: _____

Username: _____, Password: _____

Additional Information: _____

9. Name of Digital Asset: _____

Where/How to access: _____

Username: _____, Password: _____

Additional Information: _____

10. Name of Digital Asset: _____

Where/How to access: _____

Username: _____, Password: _____

Additional Information: _____

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