



2.

Devolution of Estate:

A. Legacies

Amount / \_\_\_\_\_ To whom: Full names \_\_\_\_\_ Address or contact no. \_\_\_\_\_

1.

2.

3.

4.

B. Residue

Share/% \_\_\_\_\_ To whom: Full names \_\_\_\_\_  
Address and/or contact no. \_\_\_\_\_ Alternate \_\_\_\_\_

1.

2.

3.

4.

5.

6.

7.

3.  
Financial Details

| Assets | Value | Liabilities | Value |
|--------|-------|-------------|-------|
|--------|-------|-------------|-------|

1. Fixed property:  
Address/Erf No.

Bond/s

2. Movables:     Value  
Furniture  
Motor car/s  
Guns  
Other

H.P. Agreements

3. Shares/Units

Loans

4. Investments/Cash assets

Sureties signed by you:  
To/for whom:

Your bankers:

5. If married in community of property,  
give details of your spouse's assets:

Credit Cards:

6. Amounts paid outside your estate:  
Insurance policies

Loans against any policies:

Funeral benefits

Group Life/Pension payments

|         |                     |                   |  |
|---------|---------------------|-------------------|--|
| TOTALS: | Assets _____        | Liabilities _____ |  |
|         | Difference/Balance: |                   |  |

Name & contact details of Financial Advisor (if you have one):

4.

Minors

Appointment of guardian:

Name

Address

Contact no.

If any of your heirs/legatees are minors, please tick how you would like their inheritance dealt with:

Paid to their guardian      Please state name and address of guardian:

Paid to Master of the High Court  
Guardians Fund

Paid to a Trustee      Until Age:    18 years      21 years      25 years  
Other – please state age:

Executor/Trustee

PROACTIVE WILLS & ESTATES and ATTORNEYS YVONNE DE BEER

Please tick if you require:

Cremation

Living Will – see website [www.Dignitysouthafrica.org](http://www.Dignitysouthafrica.org)

Further advice on:

Trusts(Testamentary or Inter Vivos)

Capital Gains Tax

Tax

Financial Planning/Wealth Creation

Providing liquidity in your estate

Maintenance claims against your estate

Property transactions

Effects of CGT

\_\_\_\_\_

\_\_\_\_\_

YES

I hereby consent to receiving emails from time-to-time related to their Services and updates in the Industry, as well as related matters which may be of interest, as well as telephonic communication from Proactive.

NO

SIGNATURE.....

DATE.....