| File | No.: |
|------|------|
|      |      |



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# INFORMATION REQUIRED TO PREPARE YOUR WILL

|                                  |          | DATE: _ | 11-Nov-2014 |
|----------------------------------|----------|---------|-------------|
|                                  |          |         |             |
| How did you hear about our firm? | Referral |         |             |

#### A. FAMILY AND PERSONAL INFORMATION

#### 1. FAMILY DETAILS

Full Name David Bradley Chase Middle Last (Maiden or other name used) First Address Mississauga 2010Silverberry Cr. Street/Rural Route City/Township L5J1C9 ON Postal Code Province Telephone 416-476-3701 Home Office Date of Birth <u>5-Nov-1972</u> S.I.N. <u>500</u> 224 753 Occupation Account Manager Present Employer Microsoft Marital Status Separated Place of Permanent Residence Canada Date of Marriage 15-Jun-2008 Place of Marriage Orangeville, ON (if applicable) (if applicable) Date of Divorce \_\_\_\_\_ Place of Divorce \_\_\_\_\_ (if applicable)

| Full Name of Sp   | oouse                            |                         |                               |
|-------------------|----------------------------------|-------------------------|-------------------------------|
| Brandy VanGerv    |                                  |                         |                               |
| First             | Middle                           | Last (Maid              | en or other name used)        |
| Address of Spou   | use (if different from above)    |                         |                               |
| 46 Fife St.       |                                  | Grand Valley            | <i>'</i>                      |
| Street/Ru         | ral Route                        | City/Towns              | ship                          |
| ON                |                                  | D + 1 C 1               |                               |
| Province          |                                  | Postal Code             | e                             |
| Spouse Date of I  | Birth <u>18-Dec-1976</u>         | _ S.I.N. of Spouse      |                               |
| Occupation of S   | pouse Secretary                  | Present Employer        | Orway Minerals                |
| Are you present   | ly living with your Spouse?      | No                      |                               |
|                   | of Spouse from previous licable) |                         | f Spouse from                 |
| If not married, a | re you preparing your will in    | n contemplation of Marr | iage?                         |
| If yes, name of i | ntended Spouse                   |                         |                               |
| Children and/or   | relatives to inherit under wi    | 11:                     |                               |
| NAME              | RELATIONSHIP                     | DATE OF BIRTH           | ADDRESS                       |
| Karlee Chase      | Daughter                         | 15-Jun-2006             | 46 Fife St., Grand Valley, ON |
|                   |                                  |                         |                               |
|                   | SSIONALS INVOLVED V              |                         | 7                             |
| Minister          | Full Name                        | Address                 |                               |
| Lawyer            |                                  |                         |                               |
|                   | Full Name                        | Address                 |                               |
| Accountant        |                                  |                         |                               |
| Accountant        | Full Name                        | Address                 |                               |
| Insurance Agent   | <u> </u>                         |                         |                               |

Full Name

Address

| Financial Advisor Rya     | an Quinn                | 8500 Leslie Street, Th                       | nornhill, Ontario, L | .3T 7M8                      |
|---------------------------|-------------------------|--|----------------------|------------------------------|
|                           | Name                    | Address                                      |                      |                              |
| Broker                    |                         |  |                      |                              |
| Full                      | Name                    | Address                                      |                      |                              |
| Family Doctor             | Name                    | Address                                      |                      |                              |
|                           | F IMPORTANT DO          |  |                      |                              |
| Current Will              |                         |  |                      |                              |
| Life Insurance Policy _   |                         |  |                      |                              |
| Funeral or Burial Prope   |                         |  |                      |                              |
|                           |                         |  |                      | House deed in filing cabinet |
| Automobile Registratio    |                         |  |                      |                              |
| Marriage Certificate      |                         |  |                      |                              |
| Tax Records In home f     | iling cabinet           |  |                      |                              |
| Birth CertificateIn off   | ice                     |  |                      |                              |
| PassportIn office, with b | oirth certificate       |  |                      |                              |
| Safety Deposit Box (Lo    | ocation and No.)        |  |                      |                              |
| List of Credit Card Nos   | . Mastercard 52680672   | 11265090, Visa 45000                         | 30117206155          |                              |
| Trust Agreements          |                         |  |                      |                              |
| Business Agreements _     |                         |  |                      |                              |
| Other                     |                         |  |                      |                              |
|                           |                         | SSET INVENT                                  |                      |                              |
| 1. REAL ESTAT             | E (indicate which is    | principal residen                            | ce)                  |                              |
|                           | `                       | • •  | ŕ                    | Wife?                        |
| Location & Type           | Sole/Joint<br>Ownership | Current Value<br>(do not deduct<br>Mortgage) | Husband's<br>Share   | Wife's<br>Share              |
| 2010 Silverberry Cr, Mis  | ssissauga, ON, L5J1C9   | \$ 420,000                                   | \$                   | \$                           |

| 2. HOUSEHO                                  | OLD GOODS AND F  | URNITURE                                    |  |                          |
|---|--|---|--|--------------------------|
| Description:                                | Sole/Joint<br>Ownership                                | Current Value                               | Husband's<br>Share                           | Wife's<br>Share          |
|   |  | \$  | \$   | \$                       |
| 3. HEIRLOO                                  | MS, ARTWORK, JF  | EWELLERY AND C                              | THER COLLE                                   | ECTIONS                  |
| Description:                                | Sole/Joint<br>Ownership                                | Current Value                               | Husband's<br>Share                           | Wife's<br>Share          |
|   |  | _ \$  | _ \$   | _ \$                     |
| 4. AUTOMO Description:                      | BILES, BOATS AND Sole/Joint Ownership                  | O RECREATION VI                             | EHICLES  Husband's Share                     | Wife's<br>Share          |
| Mazda Tribute                               | Ownership  | \$ 9,000                                    |  |                          |
| J. 1711111111111111111111111111111111111    | CHINERY, TOOLS   | , LIVESTOCK ANI                             | O QUOTAS                                     |                          |
| <b>5. FARM MA</b> Description:              | Sole/Joint<br>Ownership                                | Current Value                               | Husband's<br>Share                           | Wife's<br>Share          |
| Description:                                | Sole/Joint<br>Ownership                                |   | Husband's<br>Share                           | Share                    |
| Description:  6. CASH DEI  Bank             | Sole/Joint<br>Ownership<br>POSITS<br>Account           | Current Value  \$  Sole/Joint Ownership     | Husband's Share  \$  Husband's Share         | Share \$ Wife's Share    |
| Description:  6. CASH DEI  Bank             | Sole/Joint<br>Ownership  POSITS  Account               | Current Value  \$  Sole/Joint               | Husband's Share  \$  Husband's Share         | Share \$ Wife's Share    |
| Description:  6. CASH DEI Bank  7. STOCKS ( | Sole/Joint Ownership  POSITS Account  Publicly Traded) | Current Value  \$  Sole/Joint Ownership  \$ | Husband's Share  \$  Husband's Share  \$  \$ | Share \$ Wife's Share \$ |
| Description:  6. CASH DEI  Bank             | Sole/Joint<br>Ownership  POSITS  Account               | Current Value  \$  Sole/Joint Ownership     | Husband's Share  \$  Husband's Share         | Share \$ Wife's Share    |

|         | iption:    | Sole/Joint<br>Ownership | Current Value                           | Husband's<br>Share | Wife's<br>Share |
|---------|------------|-------------------------|---|--------------------|-----------------|
|         |            |                         | \$                                      |                    |                 |
| <br>9.  | MONEY IN   | VESTED IN MORTO         | GAGES AND PER                           | SONAL LOAN         | S               |
|         | iption:    | Sole/Joint<br>Ownership | Value                                   | Husband's<br>Share | Wife's<br>Share |
|         |            |                         | \$                                      | _ \$               | _ \$            |
| 10.     | INSURANC   | CE                      |   |                    |                 |
| Name    | of Company | Type Beneficiary        |   | Husband's<br>Share | Wife's<br>Share |
|         |            |                         |   | \$                 | \$              |
| <br>11. |            | AND COMPANY PEN         | NSION PLANS eneficiary (if any)         | Husband's          |                 |
|         | of Company | Type Bo                 | • | Share              | Wife's Share    |
|         | of Company | Туре Бо                 |   |                    |                 |
|         |            | & PARTNERSHIP IN        |   | Share              | Share           |
| Name    |            |                         |   | Share              | Share           |

| Details of Shareholders and/or Partnership Agreements: |                          |                              |                    |                 |  |  |
|--|--------------------------|------------------------------|--------------------|-----------------|--|--|
| 13. TRUST F  | UNDS THAT YOU A          | RE BENEFICIARY               | ' OF               |                 |  |  |
| Source   | Purpose                  | Your Rights to<br>Trust Fund |                    | Wife's<br>Share |  |  |
|  |                          |                              | _ \$               | _ \$            |  |  |
| 14. TRUST F  | UNDS THAT YOU A          | RE TRUSTEE FOR               |                    |                 |  |  |
| Nature of Trust  | Beneficiary              | Description                  | on of Property     |                 |  |  |
|  |                          |                              |                    |                 |  |  |
|  |                          |                              |                    |                 |  |  |
|  |                          |                              |                    |                 |  |  |
| These funds are no <b>OTHER</b> A                      | ot included in the value | of your estate.              |                    |                 |  |  |
| Description:   | Sole/Joint<br>Ownership  | Current Value                | Husband's<br>Share | Wife's<br>Share |  |  |
|  |                          | \$                           | \$                 | _ \$            |  |  |
| <br>ΓΟΤΑL VALUE  | OF ASSETS:               |                              |                    |                 |  |  |
|  |                          | \$                           |                    |                 |  |  |
| 16. APPROX   | IMATE DEBTS & M          | ORTGAGES OUTS                | STANDING           |                 |  |  |
| Nature of Debt   | Name & Address Join      | at/Sole Amount               | Husband's<br>Share | Wife's<br>Share |  |  |
|  |                          | ф                            | _ \$               | 4               |  |  |

## CAMPBELL BADER LLP

Lawyers & Notaries

| TOTAL AMOU        | UNT OF DEBTS: \$             |                          | \$                                |
|-------------------|------------------------------|--------------------------|-----------------------------------|
| TOTAL NET V       | ALUE OF ESTATE: \$ _         |                          | _ \$                              |
|                   | R INFORMATION stic contracts |                          |                                   |
| Details of suppo  | ort obligations, either mora | al or legal              |                                   |
| Details of any re | elevant personal situations  | s (ie, disabled, concern | as re: spending habits of family) |
| (NOTE: 1          | ~                            | TIONNAIRE TO BE          | COMPLETED WITH LAWYER) EXECUTRIX  |
| Do you want yo    | our spouse as executor/exe   | cutrix if she/he survivo | es?                               |
| If not, who is to | act?                         |                          |                                   |
| NAME              | ADDRESS                      | REI                      | LATIONSHIP (IFANY)                |
| Who is to act as  | alternative executor(s) or   | executrix(s)?            |                                   |
| (HUSBAND)         |                              | (WIFE)                   |                                   |
|                   |                              |                          |                                   |
| RELATIONSH        | IP (IF ANY)                  | RELATIONS                | IIP (IF ANY)                      |
| In the case of tw | vo executor(s) or executrix  | x(s) is one to have the  | deciding vote?                    |
| If so, who?       |                              |                          |                                   |
|                   |                              |                          | ority decision binding?           |

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|             |                       | AMING OF GI          | JARDIAN FOR CHILDREN                  |             |
|-------------|-----------------------|----------------------|---------------------------------------|-------------|
| Names of (  | Guardian(s):          |                      |                                       |             |
| First       | Middle                | Last                 | Address                               |             |
| First       | Middle                | Last                 | Address                               |             |
| Alternative | Guardian(s):          |                      |                                       |             |
| <br>First   | Middle                | Last                 | Address                               |             |
| <br>First   | Middle                | Last                 | Address                               |             |
| Name of G   | uardian(s) of child   | ren's Estate if diff | erent from above:                     |             |
| First       | Middle                | Last                 | Address                               |             |
|             |                       | E. FUNERA            | AL INSTRUCTIONS                       |             |
|             |                       | 2. 101.121           |                                       | evecutriy n |
| Any funera  | ll instructions inclu | ded in your will s   | hould be conveyed to your executor or | CACCUITA    |
| Any funera  | l instructions inclu  | ided in your will s  |                                       |             |
|             | s from Spouse, if d   |                      |                                       |             |
|             |                       |                      |                                       |             |

|   | -  |                              | how is personal property to be distributed? |  |  |  |  |
|---|--|------------------------------|---|--|--|--|--|
| 1)  | To living Children as they may agree   |                              |   |  |  |  |  |
| 2) In accordance with a non-binding memorandum filed with your will   |  |                              |   |  |  |  |  |
| 3)  | 3) In accordance with a binding memorandum (specific gift within) accompanying your with |                              |   |  |  |  |  |
| <ol> <li>To estate trustee with request that personal property be distributed according to his/he discretion</li> </ol> |  |                              |   |  |  |  |  |
| 5)  | Other (please specify deta   | ils)                         |   |  |  |  |  |
|   | Instructions for Spouse, if  | different                    |   |  |  |  |  |
| 2.  | LEGACIES (MONEY)   | and/or SPECIFIC GIFTS        | S (including Real Property)                 |  |  |  |  |
|   | of Person/Organization   | Money/Property               | Alternative                                 |  |  |  |  |
| As bei  | neficiary  | to be given                  | Beneficiary                                 |  |  |  |  |
| 3.  |  |                              | O.S.P. etc. (if different from instructions |  |  |  |  |
| Policy  | or Plan:   | Beneficia                    | ıry:  |  |  |  |  |
| 4.  | DISPOSITION OF BUS   | INESS OR PARTNERSI           | HIP INTEREST                                |  |  |  |  |
| Is ther   |  | to be held in trust, such as | s a house?                                  |  |  |  |  |
| ŕ   | hen specify the following:  Property   |                              |   |  |  |  |  |
|   | 1 - 7  |                              |   |  |  |  |  |
| Benefi  | iciary   |                              |   |  |  |  |  |
| Cost o  | of Care of Trust Property  |                              |   |  |  |  |  |

| Ins     | struc  | etions from Spous          | e, if different from above  |
|---------|--|----------------------------|---|
| -<br>5. |  | RESIDUE                    |   |
|         | or without children) and Spouse survives for a minimum of 30 days, then: |                            |   |
|         |  | - If not, then:            |   |
|         |  | ŕ                          | % to surviving Spouse   |
|         |  |                            |   |
|         |  |                            | % to other  |
|         |  |                            | % to charities  |
|         | b)   |                            | y Spouse but survived by children for a minimum of 30 days:                 |
|         |  |                            | Equally between each child  |
|         |  |                            | % to each surviving child   |
|         |  |                            | % to other  |
|         |  |                            | % to charities  |
|         | c)   | If predeceased by 30 days: | y Spouse and not survived by any children or grandchildren for a minimum of |
|         |  |                            | % to parents  |
|         |  |                            | % to parents of Spouse  |
|         |  |                            | % to siblings   |
|         |  |                            | % to charities  |
|         | d)   | If single:                 |   |
|         | u)   |                            | % to parents  |
|         |  |                            | % to siblings   |
|         |  |                            | % to other  |
|         |  |                            | % to charities  |

|                 | BELL BADER LLP<br>rs & Notaries                |  |
|-----------------|--|--|
|                 | hold as one trust until you                    | ngest reaches the age of   |
|                 | hold as one trust until the                    | oldest reaches the age of  |
| f)              | child's share of the residue of the estate? (  | led to his or her share, what is to happen to that Consideration should be given to distributing such and siblings of the dead child as the case may be. |
| g)              |  | above  |
| 6.              | ADDITIONAL INSTRUCTIONS IN WI                  | ILL  |
|                 | one the sale of the saleable assets?           | ems of the residue as well as the right to temporarily   |
|                 | ou desire any capital and income taxes, plus S | Succession Duties (if applicable) to be paid out of free of such impositions?  |
| Do yo<br>your e | 3  | her yourself or your offspring as beneficiaries of   |
| 7.              | POWER OF ATTORNEY DURING LII                   | FETIME   |
| Is a Po         | ower of Attorney for Property to be prepared   | ?  |
| Who i           | s to be the attorney and alternate attorneys?  |  |
| Husba           | and  | Wife   |
| 1.              |  | 1.   |

3. \_\_\_\_\_

## CAMPBELL BADER LLP

Do you wish the non-heroic clause?

Lawyers & Notaries

| <b>,</b>                         |      |  |
|----------------------------------|------|--|
| Husband                          | Wife |  |
| Additional information/comments: |      |  |
|                                  |      |  |
|                                  |      |  |
|                                  |      |  |

#### CAMPBELL BADER LLP PRIVACY STATEMENT

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Campbell Bader LLP is responsible for the personal information we collect, use, maintain and disclose. To ensure this accountability, we have developed a Privacy Policy (available upon request), and have provided training to our managers and support staff on how to properly implement our privacy policies and practices.

We have asked you to fill out this form because collecting some of your personal information is required as part of our legal services to you. We may at times collect sensitive financial, family, and personal preference information from you, which is required in order to provide you advice and legal services. By providing such information you consent to the use of the information as outlined in the form and for the purposes of providing you with legal advice and services.

We will keep the personal information that you provide to us in this form completely confidential. We will not disclose your personal information provided in this form to any third party without your consent.

Campbell Bader LLP is committed to protecting your privacy and we take all reasonable precautions to ensure that your personal information is kept safe from loss, unauthorized access, modification, or disclosure. We operate on a secure data network protected by an industry standard firewall and password protected systems. Our security and privacy policies are periodically reviewed and enhanced, and only authorized individuals at our firm have access to your personal information.

If you have any questions relating to the collection, use, disclosure, and/or accuracy of your personal information provided by you and held by Campbell Bader LLP, please contact our Privacy Officer at jbm@campbelllawyers.net.