



Testator

Name _____

Address _____

Executor(s)

Name(s) _____

Address _____

Telephone _____ (Res) _____ (Bus)

Email _____

To My Executor(s):

Following are my wishes with respect to funeral and burial/cremation arrangements. I understand that the final decision is your responsibility as executor(s); these wishes are meant to assist you in this process.

My preferred funeral provider is _____

Address/telephone of provider _____

I have made my own funeral arrangements Yes No

If yes, the funeral arrangements are prepaid Yes No

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executorease@concentrafinancial.ca | www.concentrafinancial.ca

My preference is Burial Cremation Other (specify)

If burial, my preferred location for burial is _____

I have purchased a burial plot/crypt Yes No

If yes, name/location/plot #: _____

If cremated, my preferred location for cremains is buried columbarium niche other (specify)

I have purchased a burial plot/columbarium/crypt/niche Yes No

If yes, name/location/plot #: _____

Headstone/Memorial Marker Yes No Existing Other (specify)

I wish to have a funeral/memorial service Yes No

If yes, the following are my wishes with respect to:

Prayer Service (prior to funeral/memorial) _____

Viewing/open casket _____

Type of service (religious, spiritual, secular, etc.) _____

Location _____

Presider _____

Special participants (e.g. fraternal organizations) _____

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Pallbearers (Name and Contact Information)

1. _____ 4. _____
2. _____ 5. _____
3. _____ 6. _____

Honourary Pallbearers (Name and Contact Information)

1. _____ 4. _____
2. _____ 5. _____
3. _____ 6. _____

Music _____

Readings _____

Eulogy _____

Social gathering _____

Private burial/disposal of cremains _____

Donations in lieu of floral tributes Yes No

If yes, please direct donations to _____

Other _____

I ask that my family respect my desires and cooperate with the Executor with respect to my wishes as stated above.

Testator's Signature: _____ Date: _____