

{INCLUDETEXT

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Our Ref: { MERGEFIELD MATTER_FEE_EARNER_ID }/{ MERGEFIELD client_no }/{ MERGEFIELD matter_no }

{ QUOTE { DATE \@ "d" *Ordinal } } { QUOTE { DATE \@ "MMMM yyyy" } }

{ MERGEFIELD FW_PRO_INV_SAV_FWISA_PRVDR_name }
{ MERGEFIELD FW_PRO_INV_SAV_FWISA_PRVDR_address }

Dear Sirs

Deceased: { MERGEFIELD
FW_PRODCDETS 1 DECEASED FULLNM }
Account Number: { MERGEFIELD FW_PRO_INV_SAV_FWISA_NO }
Address: { MERGEFIELD
FW_PRODCDETS 1 FWDCD PRV ADD1 \", \" }
{ MERGEFIELD
FW_PRODCDETS 1 FWDCD PRV ADD2 \", \" }
{ MERGEFIELD
FW_PRODCDETS 1 FWDCD PRV ADD3 \", \" }
{ MERGEFIELD
FW_PRODCDETS 1 FWDCD PRV ADDPC }
Date of Death: { MERGEFIELD FW_PRODCDETS 1 FWDCD DT DTH
\\@ "d" *Ordinal } { MERGEFIELD
FW_PRODCDETS 1 FWDCD DT DTH \\@ "MMMM
yyyy" }

We are instructed by the Personal Representatives of the above named deceased to obtain a grant of representation and deal with the administration of the estate. We enclose a certified copy death certificate for noting in your records.

Please let us have the value of the above ISA at the date of death for probate purposes. We assume that the ISA will be closed as at the date of death so that there will no longer be any tax advantages as far as the deceased's estate is concerned.

Please also let us have the requirements for dealing with the proceeds of the ISA in due course.

Yours faithfully

{ MERGEFIELD PRACTICEINFO_PRACTICE_NAME *UPPER }

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