**Deceased Estate Maintenance Claim – Living Expenses for a Child**

 **Instructions**

* Please complete the relevant cost and frequency for only the applicable living expenses in the table below.
* Frequency – please indicate monthly expenses and only fill in “frequency” when it is other than monthly (e.g., “weekly” or “every 3 years”).
* Amount – please use the amount needed for the item in question at the current Rand cost.
* Please pay attention to the specific instructions for each category, as listed in the table.
* If you incur expenses not shown on the list, please add them at the bottom and clearly identify them, as well as the frequency and amount.
* Please note that we cannot determine the claim amount for an item if we are not provided with the Rand cost and frequency.
* Please do not use excessive claim amounts or claim for costs which are not being incurred. Inflated claims are more easily disputed and once it is shown that a claim is dishonest it becomes difficult to claim for the right amount.
* If you are concerned that expenses may arise in future which are not being incurred now, please notify your attorney / the actuary and we can investigate appropriate measures to make provision for those expenses.

|  |  |  |  |
| --- | --- | --- | --- |
| **Category** | **Item** | **Frequency** | **Amount** |
|  |  |  |  |
| **Home/accommodation** | Value/share of accommodation |  Monthly |   |
|  |  |  |  |
| **Food & personal care** | Groceries  | Monthly |   |
| 1. Do not include medicine in pharmacy; show below in "medical"
2. Do not include school uniforms in “clothing”
 | Clothing | Monthly |   |
| Hairdresser | Monthly |   |
| Pharmacy & supplements | Monthly |   |
|  |  |  |  |
| **Medical** | Medical aid | Monthly |   |
|  | Direct GP / Dentist / Other | Monthly |   |
| Other medicine and healthcare | Monthly |   |
|  |  |  |  |
| **Vehicle** | Vehicle cost |   |
| 1. “Vehicle cost” only if a new vehicle must be purchased for the child.
2. Indicate the value of the child’s share of usage for “Fuel” if a parent’s vehicle is used.
 | Vehicle insurance | Monthly |   |
| Fuel | Monthly |   |
|  |  |   |
|  |  |  |  |
| **Communication & entertainment** | Cost of cell phone & computer |  Once-off |   |
|  | Cellular contract / pay-as-you-go |  Monthly |   |
|  |  |  |  |
| **Lifestyle & sport** | Holidays & travel | Monthly |   |
|  | Club membership fees | Monthly |   |

|  |  |  |  |
| --- | --- | --- | --- |
| **Category** | **Item** | **Frequency** | **Amount** |
| **Education** | School fees & classes |   |   |
| 1. For tertiary education, indicate if, what and where children will study. If it is not known yet, but it is likely that there will be tertiary education fill in "yes" and type of institution (e.g. university). | Books, stationery, and devices |   |   |
| School uniforms |   |   |
| Extra-mural activities |   |   |
| Pocket money |   |   |
|  | Tertiary education |  |  |