

## **WILL** **- CHECKLIST -**

*Power of Attorney* required:

YES/NO

*Representation Agreement* required:

YES/NO

**Your Full Legal Name:**

\_\_\_\_\_

Also Known As:

\_\_\_\_\_

Home Address:

\_\_\_\_\_

\_\_\_\_\_

Telephone:

\_\_\_\_\_

Email:

\_\_\_\_\_

Date of Birth:

\_\_\_\_\_

Place of Birth:

\_\_\_\_\_

Occupation:

\_\_\_\_\_

\_\_\_\_\_

**Marital Status:**

\_\_\_\_\_

Name of Partner:

\_\_\_\_\_

\_\_\_\_\_

Date of Birth:

\_\_\_\_\_

Place of Birth:

\_\_\_\_\_

**Children:**

Names of children from this  
relationship:

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Names of children from previous  
relationships:

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Predeceased Children:

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**Beneficiaries:**

Other Intended Beneficiaries:  
(names, addresses, relationship)

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**Executors:**

Primary Executor:  
(name, address, relationship)

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Alternative Executor:  
(name, address, relationship)

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Another Alternative Executor:  
(name, address, relationship)

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**Guardians:**

Primary Guardian:  
(name, address, relationship)

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Alternate Guardian:  
(name, address, relationship)

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Another Alternative Guardian:  
(name, address, relationship)

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**Assets and Liabilities:**

**Assets:**

Real Estate: \_\_\_\_\_

Business/Company: \_\_\_\_\_

Insurance: \_\_\_\_\_

Other: \_\_\_\_\_

**Liabilities:**

Mortgages: \_\_\_\_\_

Does anyone owe you  
money? \_\_\_\_\_

Other: \_\_\_\_\_

**Funeral Arrangements:**

\_\_\_\_\_

**Location of the Will:**

\_\_\_\_\_

**General Remarks:**

\_\_\_\_\_

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