

# Will Checklist

1. Your full name:

2. Date of birth:

3. Your address:

Postcode:

4. Tel Home:

Mobile:

5. Full name and date of birth of spouse / partner:

6. Please give the names and ages of your children:

7. Please state the names and addresses of your Executors.  
They must have agreed to act as your Executors.

A. Full name:

Address:

Post code:

B. Full name:

Address:

Post code:

8. Do you wish to make specific monetary gifts? If so please state the amount, and give the full names and addresses of all individuals (including age) and charities you want to benefit.

Can your chosen charity/charities be informed of your gift?

Yes

No

9. Do you wish to make specific gifts of property or other assets? If so, please give the full names and addresses of all individuals (including age) and charities you want to benefit including details of the property / assets.

A.

B.

C.

D.

**10. Who is to inherit the residue of your estate? That is, the remainder of your estate after the gifts of 8 and 9 above. Please write down in full the names and addresses of all individuals and charities (with registered charity numbers) together with their proportion of the residue of your estate.**

**11. Who will be the substitute beneficiaries of residue (e.g. children if spouse predeceases)?**

**12. Who will receive the residue should both your spouse and children die before you?**

**13. What is the rough value of your estate (all of your assets less liabilities)?**

**Value of your Assets**

Your home	<input type="text"/>
Other property (including abroad)	<input type="text"/>
Cars / vehicles	<input type="text"/>
Home contents	<input type="text"/>
Other items of value	<input type="text"/>
Money in the bank etc	<input type="text"/>
Shares / investments / national savings	<input type="text"/>
Insurance / pensions	<input type="text"/>
Other savings	<input type="text"/>
Other assets	<input type="text"/>

**Total Assets:**

**Your Major Liabilities**

Your mortgage	<input type="text"/>
Loans and overdrafts	<input type="text"/>
Credit cards	<input type="text"/>
Credit or HP agreements	<input type="text"/>
Other liabilities	<input type="text"/>

**Total Liabilities:**

**14. Have you made an Enduring Power of Attorney or a Lasting Power of Attorney?**

If you are interested in leaving a legacy to St. Michael's Hospice, the solicitor will discuss this with you at your appointment.

Thank you for helping us by providing this information. Please bring this to your appointment with the solicitor.