

Will- Married or Defacto with Children Checklist

TESTATOR

Full Name	Residential Address (No. Street Name, Suburb, Postcode, Country)

SPOUSE (MARRIED OR DEFACTO – ALSO EXECUTOR)

Full Name	Residential Address (No. Street Name, Suburb, Postcode, Country)

CHILDREN

Full Name	Residential Address (No. Street Name, Suburb, Postcode, Country)	Age of Control of Estate (eg 18,21 or other years)

SUBSTITUTE EXECUTOR (IF SPOUSE REFUSES, IS UNABLE, IS UNWILLING OR DIES)

Full Name	Address (No. Street Name, Suburb, Postcode, Country)

SPECIFIC GIFTS

Full Name of Recipient	Description of Gift If money, specify exact amount, currency and account details (e.g. AUD \$100.00 from John Smith Savings Account 123456)

TESTATOR'S WISHES

Disposal of body eg burial or cremation	Religious rites to be followed Eg None or Catholic	Organ Donation eg no organ donation, all organs OR all organs except for ...

GUARDIAN/S FOR INFANT CHILDREN

Full Name	Address (No. Street Name, Suburb, Postcode, Country)