

**KAHN ZACK EHRlich LITHWICK**  
**WILL CHECKLIST**

**PART I – INFORMATION FROM CLIENT – Page 1**

Note: **PART I** may be completed by client

File No.	Meeting with:	Date:
Lawyer:	Also present:	

**A. TESTATOR**

<b>Testator #1:</b> M <input type="checkbox"/> F <input type="checkbox"/>	<b>Testator #2 (Spouse/Partner)</b> M <input type="checkbox"/> F <input type="checkbox"/>
Aliases:	Aliases:
Address:	City:
Postal Code:	Res. Phone:
Business Phone:	Business Phone:
Occupation:	Occupation:
Date of Birth:	Date of Birth:
Place of Birth:	Place of Birth:
S.I.N.	S.I.N.
Citizenship: Canadian <input type="checkbox"/> Other <input type="checkbox"/>	Citizenship: Canadian <input type="checkbox"/> Other <input type="checkbox"/>

**Note: If the information below is substantially different for each spouse, attach separate sheet of paper and complete the information for each spouse separately**

Married: <input type="checkbox"/>	Divorced: <input type="checkbox"/>	Separated: <input type="checkbox"/>
Legal marriage <input type="checkbox"/> Common-law <input type="checkbox"/> Same sex marriage-like relationship <input type="checkbox"/>	Date of marriage or cohabitation started:	Place:
Is it a community property jurisdiction? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Marriage Agreement Yes <input type="checkbox"/> No <input type="checkbox"/>	Date:	Copy available:
Cohabitation Agreement: Yes <input type="checkbox"/> No <input type="checkbox"/>	Date:	Copy available:

Prior marriage: N/A <input type="checkbox"/>	Date and place:	Date of divorce:
Former spouse:	Separation Agreement or Order: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Maintenance obligation: Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, describe.		
Is Will made in contemplation of marriage/divorce?	Yes <input type="checkbox"/> No <input type="checkbox"/>	To/from:

**KAHN ZACK EHRlich LITHWICK**  
**WILL CHECKLIST**  
**PART I – INFORMATION FROM CLIENT – Page 2**

**B. CHILDREN:** N.A.  Indicate if any child has a disability

<b>Name:</b>		<b>Name:</b>	
Date and Place of Birth:		Date and Place of Birth:	
Address:		Address:	
Occupation:	M <input type="checkbox"/> F <input type="checkbox"/>	Occupation:	M <input type="checkbox"/> F <input type="checkbox"/>
Natural <input type="checkbox"/> Adopted <input type="checkbox"/>		Natural <input type="checkbox"/> Adopted <input type="checkbox"/>	
Other parent:		Other parent:	
<b>Name:</b>		<b>Name:</b>	
Date and Place of Birth:		Date and Place of Birth:	
Address:		Address:	
Occupation:	M <input type="checkbox"/> F <input type="checkbox"/>	Occupation:	M <input type="checkbox"/> F <input type="checkbox"/>
Natural <input type="checkbox"/> Adopted <input type="checkbox"/>		Natural <input type="checkbox"/> Adopted <input type="checkbox"/>	
Other parent:		Other parent:	
<b>Name:</b>		<b>Name:</b>	
Date and Place of Birth:		Date and Place of Birth:	
Address:		Address:	
Occupation:	M <input type="checkbox"/> F <input type="checkbox"/>	Occupation:	M <input type="checkbox"/> F <input type="checkbox"/>
Natural <input type="checkbox"/> Adopted <input type="checkbox"/>		Natural <input type="checkbox"/> Adopted <input type="checkbox"/>	
Other parent:		Other parent:	

Are there any children of deceased children? No  Yes

Names: of children of deceased children: \_\_\_\_\_

Any other person dependent on the Testator for financial support? No  Yes  If yes, list names

Testator serving as committee or legal guardian for any one? No  Yes  If yes, list names

Testator's Family Tree: (attach separate sheet of paper)

**KAHN ZACK EHRlich LITHWICK**  
**WILL CHECKLIST**  
**PART I – INFORMATION FROM CLIENT – Page 3**

**C. ASSETS AND LIABILITIES**

(if insufficient space, list on separate sheet of paper)

**1. REAL ESTATE    N.A.**

Street Address	Legal description	Market Value	Mortgage approx. outstanding	Interest (e.g. Joint Tenancy)	Nature (*)
			(**)		

(\*) (residential, recreational or investment)

(\*\*) Is mortgage life insured?

**2. BUSINESS INTERESTS    N.A.**

(List interests in any business, e.g. sole proprietorship, partnership, private company)

Name: \_\_\_\_\_

Value: \_\_\_\_\_

Accountants: \_\_\_\_\_

Do any special provisions need to be included in order to deal with a business? Yes  No

If yes, set out on a separate sheet of paper and obtain copies of any agreements (partnership/shareholders/buy-sell) or financial statements

**3. BANK ACCOUNTS N.A.**

<b>Bank:</b>	<b>Type of account</b>	<b>Account No.</b>
Address:		
Safety deposit box: Yes <input type="checkbox"/> No. <input type="checkbox"/>	Joint owner: Yes <input type="checkbox"/> No. <input type="checkbox"/>	
<b>Bank:</b>	<b>Type of account</b>	<b>Account No.</b>
Address:		
Safety deposit box: Yes <input type="checkbox"/> No. <input type="checkbox"/>	Joint owner: Yes <input type="checkbox"/> No. <input type="checkbox"/>	

**KAHN ZACK EHRlich LITHWICK**  
**WILL CHECKLIST**  
**PART I – INFORMATION FROM CLIENT – Page 4**

**4. LIFE INSURANCE POLICIES**    N.A.

<b>Name of Company</b>	<b>Policy No.</b>
Address:	Amount:
	Type of Policy:
Designated beneficiary:	
<b>Name of Company</b>	<b>Policy No.</b>
Address:	Amount:
	Type of Policy:
Designated beneficiary:	

**5. SECURITIES/BONDS/SHARES**    N.A.

Broker: \_\_\_\_\_  
 \_\_\_\_\_

**6. R.R.S.P.'S and RRIF'S**    N.A.

\_\_\_\_\_  
 \_\_\_\_\_

**7. PENSION PLANS AND ANNUITIES**    N.A.

\_\_\_\_\_  
 \_\_\_\_\_

**8. PERSONAL EFFECTS**    N.A.

\_\_\_\_\_  
 \_\_\_\_\_

**9. OTHER ASSETS (e.g. debts owing to you)**    N.A.

\_\_\_\_\_  
 \_\_\_\_\_

**10. FOREIGN ASSETS**    N.A.

\_\_\_\_\_  
 \_\_\_\_\_

**KAHN ZACK EHRlich LITHWICK**  
**WILL CHECKLIST**  
**PART I – INFORMATION FROM CLIENT – Page 5**

**D. LIABILITIES AND DEBTS**

Including loans payable, guarantees, indemnities. Describe in detail and provide with copies of any securities. Indicate whether life-insured.

Who will bear the tax liability? Estate            or            .

<b>CREDITORS</b>	
<b>Creditor – Name and Address</b>	<b>Approximate Amount</b>

**E. ESTIMATED VALUE OF THE ESTATE**

	<b>Testator</b>	<b>Spouse</b>	<b>Joint</b>
Total Assets	\$	\$	\$
Less Liabilities	(\$            )	(\$            )	(\$            )
Net value	\$	\$	\$