



Executor's dossier
for

By completing the particulars outlined below you will minimise the difficulties, delays, and costs that may occur if the information must be ascertained after your death. We recommend that you keep this information up to date. Your birthday or the preparation of your income tax return is an appropriate time to give consideration to the need for an update. The date on which you review this information should be inserted as indicated in Item 1.

For the purposes of capital gains tax, you must maintain records of the purchase price and date of purchase of most assets purchased on or after 20 September 1985. Please record this information as indicated and keep records of the transactions (such as contracts, invoices, receipts and the like) with this dossier.

At the same time as you review this information you should consider the terms of your Will. You should take the time to read your Will at least once every three years. **Changes in your circumstances may require immediate alteration of your Will.** Births, deaths, marriages and the acquisition and disposal of property are relevant in this regard.

Once completed, this information should be kept with the copy of your Will that you keep at home with your private papers. If you prefer, a copy of the information may be held with your original Will.

We have included a section for 'digital information'. This section is optional but may be useful for if you have various email accounts etc. that would need to be dealt with on your death.

Executor's dossier

1. **Date this information was last reviewed** _____

2. **Personal details:** _____

Surname _____

Given names _____

Maiden name (if appropriate) _____

Other names or other spellings of names _____

Address _____

Date of birth _____

Place of birth _____

If born overseas, what year did you first arrive in Australia _____

Location of birth certificate _____

Doctor _____

Address _____

Phone number _____

3. **Details of marriage and children**

Marriage

Spouse's full name _____

Date of marriage _____

Place of marriage _____

Location of marriage certificate _____

Other marriages

(a) Children (living and deceased)	Date of birth/Date of death
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_____	_____
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(b) **Grandchildren** **Parents** **Date of Birth**

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4. Family details:

(a) **Parents** **Father** **Mother**

Given names
 Maiden name
 Place of birth
 Date of birth

Date of marriage

Place of marriage

(b) **Brothers and sisters**

Given names **Married name** **Date of birth**

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Address

Given names **Married name** **Date of birth**

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Address

Given names **Married name** **Date of birth**

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Address

Given names **Married name** **Date of birth**

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Address

Given names **Married name** **Date of birth**

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Address

Given names **Married name** **Date of birth**

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Address

5. **On death please notify immediately**

Name **Address** **Telephone no**

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6. **Funeral arrangements**

(a) I desire burial/cremation at

(b) Service to be conducted by

(c) according to the rites of religious denomination.

(d) Leave home/church/ parlour

(e) Special service, RSL/Lodge/ other

(f) **The following special arrangements regarding my funeral:**

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(g) **I have made arrangements regarding payment of the cost of my funeral with**

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Funeral Directors. Documents regarding this are located

(h) **Directions regarding use of human tissue**

Such directions should be detailed in your Will and next-of-kin, personal medical attendant and donee institution notified. Special arrangements (including completion of an eye donor form or the carrying of a kidney card) are usually necessary.

7. **Hospital benefits or Friendly Society**

Name

Address

Membership no.

Location of membership book or card

8. **My Will**

Location

Date of last Will/Codicil to existing Will

Executor

Address

Telephone no.

Executor

Address

Telephone no.

9. **My solicitor is** _____

Name of firm _____

Address of firm _____

Telephone no. _____

10. **My accountant is** _____

Name of firm _____

Address of firm _____

Telephone no. _____

Who attends to income tax affairs if not above?

11. **Assets**

(a) **Home**

(i) **Owned singly/jointly with** _____

of (address) _____

Location of title deed and insurance policies for house and contents

(ii) **Mortgaged** **Yes/No**

To whom (if relevant) _____

(b) **Bank, building society or credit union accounts**

Bank, building society, credit union	Branch	Account no	Account name	Location of passbook
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(c) **Superannuation fund**

Name of fund

Communicate with

Name

Address

Binding death benefit nomination

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Other details

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(d) **Other entitlement from employer**

Name of employer

Address

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Entitlement

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(e) **Life insurance**

Policy no.	Company	Type of policy	Location of policy documents
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(1)
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Special details

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Policy no.	Company	Type of policy	Location of policy documents
(2)			

Special details

Policy No.	Company	Type of policy	Location of policy documents
(3)			

Special details

(f) **Shares in companies**

Name of company	No.	Type of shares	Purchase price / date of purchase	Location of share certificate

(g) **Debentures**

Name of	Amount	Type of debenture	Location of debenture certificates

(h) **Bonds**

Type face value	Interest payable	Location of certificate of title

(i) **Motor vehicle**

Type _____

Location of certificate of registration _____

Insurance details _____

Location of insurance policy _____

Hire purchase/leasing details _____

Documents _____

(j) **Other assets**

Here consider the following:

- | | |
|--|--|
| | (ix) watches, trinkets and jewellery |
| (i) interest in a deceased person's estate | (x) rents |
| (ii) interest in a partnership | (xi) money in hand or house |
| (iii) interest in a trust | (xii) mortgages |
| (iv) property over which you have a power to appoint | (xiii) plant, tools and equipment |
| (v) livestock and crops | (xiv) debts due to you |
| (vi) farming implements | (xv) stock in shop or business |
| (vii) harness and saddlery | (xvi) goodwill |
| (viii) furniture, plate, books and pictures | (xvii) other real estate or leaseholds |

Type	Location	Details	Purchase price / date purchased	Location of documents, relevant insurance policies and any other relevant details

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12. Safe deposit

Location

13. Repatriation (if applicable)

Repatriation no.

Service no.

Unit

War disability

Pension payable

14. Digital information

Computer – home/personal

Username:.....

Password:

Computer – work/business

Username:.....

Password:

Email – personal

Email address:

Password:

Email – work/business

Email address:

Password:

Email – other

Email address:

Password:

Internet Service Provider

Username:.....

Password:

Facebook/Twitter/Instagram etc......

Username:.....

Password:

Mobile Phone - personal:

Phone number:.....

Phone model:

Security code (on start up):.....

PIN (if different):

Mobile phone – work/business:

Phone number:.....

Phone model:

Security code (on start up):.....

PIN (if different):

iPad etc.

Model:.....

Security code (on start up):.....

PIN (if different):

Accounts for digital music/books.....

Provider:

Username:.....

Password:

15. **Estate liquidity work sheet**

Please consider the details below to make sure that you have adequately provided for the needs you wish to be met on your death. Funds could be provided for from life insurance or disposable assets, including cash.

Immediate	\$
Funeral expenses	_____
Pharmaceutical	_____
Medical	_____
Hospital	_____
Household	_____
Family continuance	_____
Administration	
Legal	_____
Executor	_____
Payout mortgages	_____
Payout loans	_____
overdrafts	_____
income tax due or potential	_____
hire purchase	_____
leases	_____
Future	
Education	_____
Retirement	_____
Family income	
\$	_____ for _____ years _____
Bequests/lump sum	_____

16. **Have you given a Power of Attorney to any person? If so, advise details**

17. **Particular wishes regarding upbringing of children**

Record some directions for the guardians of your children (including, education, religion, health case, holidays, pocket money, financial help, who they are to have contact with, where they live etc.)

18. **Additional details**

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Signature