

# Leighan's List

What I own and where it is kept

If you are using this form, don't forget to ensure it is stored securely.

## Personal information:

Full Name:

Initials:

Address:

Postcode:

Home Phone Number:

Mobile Number

National Insurance Number:

HMRC Reference (if applicable):

Date of Birth:

## Key Contacts:

### Employer

Name and Address

Contact:

### Pension Provider(s)

Name and Address

Contact:

### Doctor

Name and Address

Contact:

## Key Contacts:

### Dentist

Name and Address

Contact:

### Solicitor

Name and Address

Contact:

### Others

Name and Address

Contact:

## My Will:

The original of my Will is held with:

The Will is dated:

The Will was drawn up by:

My Executors are:

# My Will:

## Other Information

Please use this section to record any additional information e.g. – requests regarding funeral arrangements, deed/safe box access, computer access codes

## Powers of Attorney:

Date made:

Has it been registered?

Yes

No

Names and addresses of individuals to be notified of any application to register the Power of Attorney

Name and address of attorneys:

## Bank / Building Society Accounts

Name and Address of Bank /  
Building Society branch

Sort Code

Account No:

Contact

| Name and Address of Bank /<br>Building Society branch | Sort Code | Account No: | Contact |
|---|-----------|-------------|---------|
|   |           |             |         |
|   |           |             |         |
|   |           |             |         |

## Credit Cards

Credit Card Company:

Account No:

Contact

| Credit Card Company: | Account No: | Contact |
|----------------------|-------------|---------|
|                      |             |         |
|                      |             |         |
|                      |             |         |

## Loans

Company:

Account No:

Contact:

| Company: | Account No: | Contact: |
|----------|-------------|----------|
|          |             |          |
|          |             |          |
|          |             |          |

## My Assets

SAVINGS ACCOUNTS, including  
instant access savings accounts,  
ISAs, Premium Bonds, shares

Provider:

Plan / Account No:

Contact:

| Provider: | Plan / Account No: | Contact: |
|-----------|--------------------|----------|
|           |                    |          |
|           |                    |          |
|           |                    |          |

Comments / Notes:

|  |
|--|
| <br><br><br><br><br><br><br><br><br><br> |
|--|

# My Pension

Provider (name and address)

Latest Plan Value

Plan / Account No:

Contact

| Provider (name and address) | Latest Plan Value | Plan / Account No: | Contact |
|-----------------------------|-------------------|--------------------|---------|
|                             |                   |                    |         |
|                             |                   |                    |         |
|                             |                   |                    |         |

Comments / Notes:

# My Insurances

Provider (name and address)

Latest Plan Value

Plan / Account No:

Contact

| Provider (name and address) | Latest Plan Value | Plan / Account No: | Contact |
|-----------------------------|-------------------|--------------------|---------|
|                             |                   |                    |         |
|                             |                   |                    |         |
|                             |                   |                    |         |

Comments / Notes:

# My Property (Owned / Mortgaged)

Type:

Address:

Value:

Ownership:








Outstanding:

loan

| Type:          | Address: | Value: | Ownership: | Outstanding:<br>loan |
|----------------|----------|--------|------------|----------------------|
| Main Residence |          |        |            |                      |
|                |          |        |            |                      |
|                |          |        |            |                      |



# Social Media

| Platform   | Username / Email | Password |
|--|------------------|----------|
|   |                  |          |
|   |                  |          |
|   |                  |          |
|   |                  |          |
|   |                  |          |
|   |                  |          |
|  Google passport<br>(Gmail, Youtube etc) |                  |          |
|  |                  |          |
|  |                  |          |
|  |                  |          |
|  |                  |          |
|  |                  |          |
|  |                  |          |
|  |                  |          |
|  |                  |          |





# Other Contacts

Home-related (Utility Companies, Contents and Building Insurance, Maintenance Agreements, if applicable e.g. servicing central heating, gardening, household appliances)

Name:

Account / Membership No:

Contact

| Name: | Account / Membership No: | Contact |
|-------|--------------------------|---------|
|       |                          |         |
|       |                          |         |
|       |                          |         |
|       |                          |         |
|       |                          |         |
|       |                          |         |
|       |                          |         |
|       |                          |         |
|       |                          |         |

# Miscellaneous Information:

Details of Organisations and Clubs (e.g. gym membership, magazine subscriptions, professional body subscriptions)

Name:

Account / Membership No:

Contact

| Name: | Account / Membership No: | Contact |
|-------|--------------------------|---------|
|       |                          |         |
|       |                          |         |
|       |                          |         |
|       |                          |         |

# In memory of Leighan Elizabeth Phillips

The Leighan's List project seeks to provide employers with information they can use to include estate planning as part of their well-being offer to employees. It also provides information for individuals and executors. The project shares the experience of the creators in resolving estates of family members (with and without wills) and reflects on what would have been helpful to manage those processes more smoothly. It does not seek to give advice or guidance and does not replace the need for individuals to obtain advice from suitably qualified legal professionals when considering a will.

The project is In memory of Leighan Elizabeth Phillips - a loving mother, partner, daughter and sister who spent most of her career in public service and who died in January 2021, aged 45.

**Leighan Elizabeth  
Phillips**

**1976-2021**



This document is intended as a guide only for you to record details of your assets, what you own and where it is kept, to assist your executors to administer your estate. It is a generic guide only and will not necessarily cover all of your personal requirements. Accordingly, you should tailor it to match your personal position and not assume it is all-encompassing and suited to your personal needs. We accept no responsibility or liability for the contents or otherwise of this document, and you use it at your own risk.