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Estates & Wills & Trusts

Beneficiary nurse stands to receive almost \$1 million



By [Charles Ticker](#)

A [recent story](#) from Australia published online on The Age illustrates some of the difficulties seniors and their caregivers may face as a result of late life will changes. In this scenario, a nurse from Melbourne, Australia was made executor and the sole beneficiary of an elderly man's estate that is estimated to be worth close to \$1 million. The nurse in question is Abha Anuradha Kumar and the testator was Lionel Markey Cox. In the winter of 2015, Cox became frail and had to be move to a nursing

home, the Cambridge House. Cox was 92 years old and did not have close family. People who knew Cox have said that he could be suspicious of his caretakers as he thought they were trying to get written into his will. Some of his neighbours were also told by him that he intended to leave his property to the state or various institutions that had cared for him.

After he passed away on August 9, 2015, court documents showed that on or about July 27, 2015, Cox executed a new will making Kumar the executor and the sole beneficiary under the will. The signing was allegedly witnessed by two other staff members at the Cambridge House. Kumar attended the funeral and filed for probate in the Supreme Court of Victoria sometime in October 2015. The application was granted by the court on November 20, 2015.

As time passed, Cox's neighbours made a complaint and an investigation was launched by St. Vincent's Health, the health service in charge of Cambridge House. The investigation concluded that there was no evidence of undue influence by Kumar. Furthermore, it seems like Kumar intends to donate the proceeds of the estate to charities named by Cox in a previous unsigned will.

It is unclear to which charities the proceeds will be donated and by when. The matter is still under investigation by the Nursing and Midwifery Board of Australia. None of the allegations in the original story or by the parties involved have been proven in court. It will be interesting to see what happens in this scenario.

This story is a reminder to caregivers that actions taken by a patient toward the end of life changing a succession plan are likely to attract scrutiny. This is especially true if the caregiver suddenly becomes the sole beneficiary of the estate. Cox did not have close family, yet his actions were called into question by neighbours who had allegedly heard from him what he intended to do with his estate. The will would have likely been fiercely contested if there had been close family relatives who were suddenly excluded. The proximity of the alleged execution of the will (July 27) to his death (August 9) can also be problematic. Cox was 92 years old at the time, and although capacity does not appear to have been an issue, he was frail to the point of having to live in a nursing home. He was likely dependent on Kumar and the staff at Cambridge House.

If a testator truly intends to make a caretaker sole beneficiary, it is important to seek legal advice and to ensure the will is not open to a challenge. A lawyer competent in estate law in the jurisdiction in question should be retained to assist the parties involved in the will preparation process.

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