# My Estate Planning Glorkbook 

## ST. PAULS <br> SENIOR LIVING COMMUNITY

## A complimentary guide to help you gather and organize the essential information you will need to complete your estate planning.

Please note: this is not a legal document. It is simply a tool for organizing your information to share with your attorney and financial advisor completing your estate plan. You might also find it helpful to share with your family, power of attorney, trustee or estate executor.

## MY PERSONAL INFORMATION



Service-Related Disability? $\square$ Details: $\square$

Marital Status: $\square$ Single $\square$ Married $\square$ Widowed $\square$ Divorced
$\square$
Date of Birth: Social Security Number:

Veteran? $\square$ Service Number: $\square$ VA Number: $\qquad$ (if applicable)
Service-Related Disability? $\square$ Details: $\square$
Date Married: $\square$ Location Married: $\square$ Date Widowed: $\square$

## PREVIOUS MARRIAGE:

$\square$

$\square$

## MY FAMILY INFORMATION

List in order the family members you want to include in your estate plan.

1. Children 2. Grandchildren 3. Brothers/Sisters 4. Parents 5. Nieces/Nephews

| Legal Name | Relationship | Date of <br> Birth | Address | Phone Number |
| :--- | :--- | :--- | :--- | :--- |
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## MY IMPORTANT DOCUMENTS

Use this checklist to keep track of the existence and location of important documents.

Safe Deposit Box (SDB) Number:
Bank:
Fireproof Safe (FPS) Location:
Important File Location:


Insurance Policies:


Key Location:
Authorized Access:
Combination/Key Location:
Box Location: $\square$


Other Documents:


Advance Directives:


## MY ASSET INVENTORY

1. Real Estate (main residence, camp, vacation home, etc.)

| Description <br> of Property | Location | Purchase <br> Cost | Current <br> Value | Mortgage Owed | Current Value <br> Mortgage Owed <br> Total Value |
| :--- | :--- | :--- | :--- | :--- | :--- |
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## TOTAL APPROXIMATE VALUE:

$\square$

## 2. Personal Belongings

| Type of Propery | Ownership | Current Value |
| ---: | :--- | :--- |
| Furniture/Furnishings |  |  |
| Jewelry |  |  |
| Antiques/Collections |  |  |
| Artwork |  |  |
| Tools \& Equipment |  |  |
| Musical Instruments |  |  |
| Automobiles |  |  |
| Firearms |  |  |
|  |  |  |

TOTAL APPROXIMATE VALUE: $\square$
3. Cash (checking accounts, savings accounts, certificates of deposit, etc.)

| Bank | Address | Ownership | Value |
| :---: | :--- | :--- | :--- |
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TOTAL APPROXIMATE VALUE: $\square$
4. Stocks, Bonds and Mutual Funds

| Company | Cost Basis | Ownership | Present Value |
| :---: | :---: | :---: | :---: |
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TOTAL APPROXIMATE VALUE:
5. Retirement Plans

| Institution Name | Account \# | Phone <br> Number | Beneficiary | Amount |
| :--- | :--- | :--- | :--- | :--- |
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$\square$
6. Pension Plans

| Institution Name | Account \# | Phone <br> Number | Beneficiary | Amount |
| :--- | :--- | :--- | :--- | :--- |
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TOTAL APPROXIMATE VALUE: $\square$
7. Deferred Compensation

| Institution Name | Address | Ownership | Amount |
| :--- | :--- | :--- | :--- |
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TOTAL APPROXIMATE VALUE: $\square$

## 8. Annuities

| Institution Name | Account \# | Ownership | Amount |
| :--- | :--- | :--- | :--- |
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TOTAL APPROXIMATE VALUE: $\square$
9. Life Insurance

| Company | Type of Policy | Policy Number | Beneficiary | Amount |
| :--- | :--- | :--- | :--- | :--- |
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## TOTAL APPROXIMATE VALUE:

$\square$
10. Business Agreements (relating to interests in corporations, partnerships \& sole proprietorships)

| Type | Company | Address | Value |
| :--- | :--- | :--- | :--- |
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TOTAL APPROXIMATE VALUE:
11. Money Owed to You (from personal loans, mortgages, rental agreements, etc.)

| With Whom | Address | Type of Debt | Current Value |
| :--- | :--- | :--- | :--- |
|  |  |  |  |
|  |  |  |  |
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TOTAL APPROXIMATE VALUE:
$\square$

MY DEBT INVENTORY (Do not include mortgages as these are already accounted for in your Real Estate Asset Inventory. Include any other debts such as credit cards and personal loans.)

| Company | Account <br> Number | Address | Type of Debt | Amount |
| :--- | :--- | :--- | :--- | :--- |
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## MY ESTATE SUMMARY


$\square$

## MY LIFE INCOME INFORMATION

$\square$ Charitable Trust

$\square$

$\square$
$\square$

| $\square$ Testamentary Trust |  |
| ---: | :--- |
| With Whom: | $\square$ |
| Trustee: | $\square$ |
| Assets in Trust: | $\square$ |
| Beneficiaries: | $\square$ |
| Income |  |
| Recipients: |  |

$\square$ Charitable Gift Annuity
$\square$
$\square$
Charitable $\square$
$\square$
$\square$ Living Trust
With Whom:
Trustee:
Thsets in Trust:
Aeneficiaries:
Ber
Income
Recipients:

## Revocable Trust

$\square$
With Whom: $\square$
Trustee: $\square$
Assets in Trust: $\square$

Beneficiaries: $\square$
Income
Recipients:

## $\square$ Pooled Income Fund

## With Whom: <br> $\square$

$\square$
Charitable Beneficiaries: $\square$
Income
Recipients: $\square$

## MY CHARITABLE INTERESTS

You may want to include a gift for your favorite charities in your estate plan. If St. Paul's has made a positive difference in your life, we hope you will consider making a legacy gift.

$\square$ Yes! I want to make a legacy gift to the following organizations:

## 1. Organization's Legal Name:

$\square$

## Address:



Tax ID: $\square$
I wish to give the following:
$\square$ Amount: $\square$
2. Organization's Legal Name:
$\square$
Address:


Tax ID: $\square$
I wish to give the following:
$\square$ Amount: $\square$
$\square$ Percentage: $\square$
3. Organization's Legal Name:
$\square$
Address:


Tax ID: $\square$
I wish to give the following:

4. Organization's Legal Name:
$\square$
Address:


Tax ID: $\square$
I wish to give the following:


Amount: $\square$
$\square$ Percentage: $\square$

## MY ESTATE DISTRIBUTION

An executor is the person you appoint to carry out the terms of your will. If you do not name an executor in your will, the court will appoint one.
$\square$
$\square$
$\square$
$\square$
Address: $\square$
Phone Number: $\square$

## SPECIFIC BEQUESTS

Do you want to leave certain personal property, real estate or assets to specific individuals or organizations? Those will need to be listed in your will. You can use this worksheet to compile them here.

Birthdate: $\square$ Relationship: $\square$

Address: Bequest: $\square$ $\square$
$\square$ Percentage: $\square$
$\square$ Remainder of Estate Specific Item(s): $\qquad$

## SPECIFIC BEQUESTS (continued)



## MY CHILDREN'S CARE

If you have minor children, you will want to name a guardian for them in your will. This person will be responsible for the care of your children and the property you willed to them. If you prefer, you can split these duties and appoint a guardian to care for your children and a trustee to handle the property/assets of the estate.

$\square$
Phone Number:
$\square$
Trustee: Relationship:
$\square$
Phone Number: $\square$

Alternate Trustee: $\square$ Relationship: $\square$ Address: $\square$
Phone Number: $\square$

## MY CELEBRATION OF LIFE PLANS



Cremation Instructions:


In lieu of flowers, please suggest memorial gifts to:
$\square$

1. Organization:

Address: $\qquad$
2. Organization: $\square$
Address: $\square$

## MY KEY ADVISORS



## HELPFUL INFORMATION FOR MY FAMILY



MY NOTES

# ST.PAULS SENIOR LIVING COMMUNITY 

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